Department of the Treasury Internal Revenue Service

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)

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

2009

OMB No 1545-0047

A For	the :	2009 cale	ndar vea	r, or tax year beginning	08-01-2009 and	ending 07-31-2010			Inspection
			lease	C Name of organization				D Employer i	dentification number
— _{Addı}		nange u	se IRS	People for the Ethical Tre of Animals Inc	atment			52-12183	336
— Nam	ne cha	nge p	abelor rintor	Doing Business As				E Telephone	number
— Initia	al retu		ype. See pecific	Number and street (or P	O how if mail is not de	livered to street address) Doom/suite	(757) 962	-8304
— Tem	nınate	d I i	nstruc- ions.	501 Front Street		iivereu to street duuress) Room/suite	G Gross receipt	ts \$ 44,242,473
Ame	ended	return		City or town, state or cou Norfolk, VA 23510	ntry, and ZIP + 4				
Appl	lication	n pending		,					
				ne and address of princ Newkirk	ipal officer		H(a) Is the	s a group retu	ırn for ┌ Yes
			501 Fro	ont Street			allilla	les.) 165 J NO
			NOTTOIK	,VA 23510				l affiliates inclu	
_[Tax	-exem	npt status	√ 501(c)	(3) ◀ (insert no)	947(a)(1) or			o," attach a lis ip exemption r	st (see instructions) number >
J We	ebsit e	e:⊫ www.p	eta org						
			-	ion Trust Association	Other 🕨		L Year of fo	rmation 1980	M State of legal domicile
Par		Summa		. ,					
	1	Briefly des		e organization's missio al rights	n or most significai	nt activities			
೭									
sovemance									
■									
<u> </u>	2	Check this	s box 🟲	f the organization dis	continued its opera	ations or disposed o	f more than		
	3	Number of	f voting n	nembers of the governı	ng body (Part VI, lı	ne 1a)			3
Activities &	4	Number of	fındepen	dent voting members o	f the governing boo	ly (Part VI, line 1b)		•	4
	5	Total num	berofen	nployees (Part V , line 2	a)	•			5
₹	6	Total number of volunteers (estimate if necessary)							6
₹	7a	Total gros	s unrelat	ted business revenue fi	•	:	7a 67,		
	b Net unrelated business taxable income from Form 990-T, line 34								7b -79,
							Prio	r Year	Current Year
	8	Contribu	tions and	d grants (Part VIII, line	1h)			32,082,042	32,987,0
nue	9	Program	servicei	revenue (Part VIII, line	2g)			532,331	557,0
Reven	10	Investme	ent incon	ne (Part VIII, column (A), lines 3, 4, and	7d)		659,103	532,6
"	11	O ther re	venue (P	art VIII, column (A), lı	nes 5, 6d, 8c, 9c, 1	Oc, and 11e)		917,081	1,205,4
	12			dd lines 8 through 11 (i				24.400.557	25 202 4
								34,190,557	35,282,1
	13			r amounts paid (Part I)				3,214,925	1,082,2
	14			r for members (Part IX					
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)						7,127,009	7,514,6
Expenses	16a	•	Professional fundraising fees (Part IX, column (A), line 11e)						378,3
ਡੀ	b	Total fundr	raising expe	enses (Part IX, column (D),	line 25) ► 4,820,987				
_	17	Otherex	penses (Part IX, column (A), lır	es 11a-11d, 11f-	24f)		22,418,375	26,816,4
	18	Totalex	penses A	Add lines 13–17 (must	equal Part IX, colu	ımn (A), lıne 25)		33,190,056	35,791,7
	19	Revenue	less exp	enses Subtract line 18	3 from line 12 .			1,000,501	-509,5
Net Assets or Fund Balances								g of Current ear	End of Year
1968 1988 1988	20	Total acc	sets (Par	t X, line 16)				24,656,863	21,894,5
88	21			Part X, line 26)				6,929,988	4,697,5
5 E	22		-	d balances Subtract III				17,726,875	17,196,9
	t II		ture Blo		10 21 110111 11110 20			17,720,073	17,130,3
rei	. 11	_		лигу, I declare that I have е	yamined this return in	cluding accompanying s	chedules and st	tatements and to	the hest of my knowledg
				correct, and complete Decla					
Sign Here		*****					01-31		
		Signatu	****** 2011- Signature of officer Date						
		Ingrid E	Newkirk F	President					
			r print nam						
		Preparer's			Date		eck if		ntıfyıng number
Paid		signature		d Bockman		sei em	lf- npolyed 🕨 🦵	(see instruction	ns)
orepa	rer's	Firm's name	e (or vour	s 👠 Saggar & Rosenberg PO	<u> </u>		ipolycu r		
Jse O		ıf self-empl	loyed),	<u> </u>				EIN 🕨	
		address, an	nd ∠IP + 4	One Church Street Suite	204			Phono no L	(301) 738-9040
				Rockville, MD 20850					· ,
1ay tl	he IR	S discuss	this retui	rn with the preparer sho	wn above? (see in:	structions)			ΓYes ΓNο

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Protection of animal rights

2	Did the organization und the prior Form 990 or 9		ant program se	ervices during the year v		Yes ✓ No
	If "Yes," describe these	new services on Sc	hedule O			
3	Did the organization ceaservices?		-	nt changes in how it con		⊤Yes ▽ No
	If "Yes," describe these	changes on Schedu	ule O			
4	Section 501(c)(3) and	501(c)(4) organizat	ions and secti	_	argest program services by e e required to report the amou ervice reported	•
	(Code) (Expenses \$	11,046,509	ıncludıng grants of \$	12,771) (Revenue \$)
	supporters These efforts in publications such as factshe	nclude materials made av eets, booklets, fliers, pos	vailable through o sters, and PETA's i	our programs for younger child magazine, Animal Times Can	s that are distributed to students, to dren, high school and college stude npaigns involve renowned celebritic public service announcements, wh	nts, and educators as well as es, extensive media attention,
	(Code) (Expenses \$	9,468,096	ıncludıng grants of \$	279,865) (Revenue \$)
	(more than 26,000) in history Rabbinate of Israel to anno University of Utah's laborat shelters to sell animals to la Petland, and Pet Supplies "many animal abusers, inclubeaten and strangled a maneglected pit bull was 20 pcat from a foreclosed home a hoarder in Tennessee, ar delivered 354 sturdy, straw	ory Our undercover inve- bunce that by 2011 it will cories led to the school be aboratories upon request 'Plus"-exposed deplorable iding a longtime horse tracaque, a South Carolina ounds underweight and se e in Florida, secured the nd organized a search an y-filled doghouses for lon PETA Our highly success	estigation of a teri I no longer certify eing cited for fede t PETA's undercove le cruelty, and Sui rader and dog bre man who cooked so anemic that ar seizure of more to di rescue for a ha	Infying and painful method of meat as kosher if it comes fieral Animal Welfare Act violativer investigation of Sun Pet-an Pet was fined and put on pieder in West Virginia whose if a dog to death in an oven, in emergency blood transfusion han 30 emaciated, starving cipless raccoon who'd been land forced to live outdoors, and	Global Exotics (USGE) prompted th kosher slaughter known as "shackle ond nost" slaughte ons, and Utah passing a law doing Georgia-based breeding mill and srobation. We aided in the successfunore than 80 animals were seized, a woman who starved her dog in an was recommended for her. We grattle in Texas, helped remove and guishing for two days with a pickle worked with the town of Windsor, e surgeries available at little to no	e and hoist" led the Chief rhouse Our investigation of the away with the requirement for supplier to PETCO, PetSmart, oil prosecution and conviction of a Japanese wrestling star who'd filthy pen, and a man whose of help for starving dogs and a rescue more than 80 dogs from Jar stuck on his head We also NC to open a new animal
4c	clothing, experimentation, a spare millions of chickens fi pigs to cruel gestation crate in which players use a mec and Gap and high-end mer and Nike to commit to a ba and Texas Tech University the University of Texas-Dal very first class on the searc aquariums from its shelves, commercials, helped nix nu rides, donkey basketball ga contestants chain raccoons	and entertainment industrom broken limbs and dees, dissuaded Chop's Lob chanical claw to catch and an on selling products made the limbs and t	etries In fiscal yea eath by scalding, oster Bar from dis d win a live lobster itlett to stop using ade from the skin (TTUHSC) to stop imals in labs and use of animals in T&T, Bridgestone, g kiss-a-pig conter ways as carnival p dogs on them, w king Company, L	gns to inform the public about ar 2010, PETA increased pressigot Sonic to agree to move the playing live lobsters on ice, per, convinced retailers Ethical gowool from mutilated Austral soft tortured snakes, lizards a using cats in deadly medical several other schools to cut do experiments, jumped in to he Samsung, Verizon Wireless, sts, promotional displays using prizes, hold-a-tiger-cub photo orked with Boston Logan Interessign 1.	789,651) (Revenue \$ t, among other things, how animal ure on McDonald's to adopt a new oward using more cage-free eggs a ersuaded numerous restaurants to Products, Lane Bryant, Fashion Bug ian sheep, got H&M, Overstock coi and crocodiles, pressured Heartland training exercises, convinced the U lissection out of their curriculums, p nelp frogs by pushing JC Penney to and numerous top ad agencies to a g live animals, kangaroo boxing ac concessions, and a sickening "cooi rnational Airport, and nationwide co pripus Christi, Neumann University,	slaughter technology that would and suppliers who do not subject remove arcade-style machines of, and Catherine's to go fur-free m, Victoria's Secret, La Senza, Hospital in St Joseph, Missouri University of California Irvine and persuaded the USDA to teach its clear "Planet Frog" minigree to stop using apes in their tist, butterfly releases, pony on a log" event in LA where mains CVS and Dollar General to
	Other program service		edule O)			
	(Expenses \$	•	luding grants o	of\$) (Revenue \$)
	Total program service	·	30 449 34	<u> </u>	•	•

	art IV	Checkli	st of	Reauired	Schedule
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	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Νο
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance	art V	Statements	Regarding	Other IRS	Filings and	Tax (Compliance
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			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 202			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	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)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶CA See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		Νο
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νο
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νo
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Νo
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			-110
	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νο
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
	If "Yes," enter the amount of tax-exempt interest received or accrued during the vear			

Norfolk, VA 23510 (757) 962-8304

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management					
	Cool Al Coverning Dody and Flanagement		Yes	No		
1a	Enter the number of voting members of the governing body 1a 3					
b	Enter the number of voting members that are independent 1b 2					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		 No		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		 N о		
6	Does the organization have members or stockholders?	6		N o		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		 N o		
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		N o		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		 N o		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal					
Re	venue Code.)					
			Yes	No		
	Does the organization have local chapters, branches, or affiliates?	10a		N o		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		No		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes			
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes			
13	Does the organization have a written whistleblower policy?	13	Yes			
14	Does the organization have a written document retention and destruction policy?	14	Yes			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a	Yes	_		
b	Other officers or key employees of the organization	15b	Yes			
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the					
_	organization's exempt status with respect to such arrangements?	16b		Νο		
	ection C. Disclosure		01/ /	2.11		
17	List the States with which a copy of this Form 990 is required to be filed ₩W / , WI , WA , VA , UT , TN , SC , RI , P NY , NM , NJ , NH , ND , NC , MS , MO , MA , LA , KY , KS , IL , HI , GA , FL , DC AR , AL , AK	MN, M	I,ME,	MD,		
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ıe orga	nızatıor	. ►		
	Angela Tumwa 501 Front Street					

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did n	ot compens	ate any	curr	ent d	or fo	rmer o	ffice	r, director, trustee o	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	righest compensated microyee Key employee Officer Institutional Trustee Individual trustee or director		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Wendy Taft Veterinarian	40 00					х		111,888	0	2,647
Tracy Reiman Vice President	40 00			х				67,714	0	4,489
Michael Rodman Chairman,Treas	1 00	Х		х				0	0	0
Jeff Kerr Asst Secretary	40 00			х				0	117,175	5,751
Jeanne Roush Director	1 00	Х		х				0	0	0
Ingrid E Newkirk President	40 00	Х		х				37,701	0	2,738

217,303

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		Νo
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person			
	rendered to the organization in the second complete Schedule from Such person in the second control in the sec	5		l No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Production Solutions 1953 Gallows Rd Suite 600 Vienna, VA 22182	Postage/Printing	697,318
Moore Wallace Response Mktg Svcs 1333 Scheuring Rd De Pere, WI 54115	Postage/Printing	1,733,679
Fross Zelnick Lehrman & Zissu 866 United Nations Plaza NY, NY 10017	Attorneys	613,121
Foundation to Support Animal Protection 501 Front Street Norfolk, VA 23510	Supporting Services	9,498,314
Brokers Worldwide 701 Ashland Ave Folcroft, PA 19032	Postage	578,387
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►18) who received more than	

Form 99								Page 9
Part \	/!!!	Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated camp	paigns 1a	356,499				
gra	Ь		es 1b	670,431				
its, ran	c d	Fundraising eve	ents 1c					
9. ⊞	e	Government grants						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	butions included in	31,960,109				
and	h	lines 1a-1f \$ Total. Add lines	3 1a-1f	▶	32,987,039			
				Business Code				
Program Serwce Revenue	2a	Spay/Neuter Progra	am	900,099	505,500	505,500		
Rev	b	Advertising revenue	e	900,004	51,507		51,507	
MCA	С							
Š	d							
Tan L	e f	All other progra	ım service revenue					
ت بر	'							
	g 3		s 2a-2f		557,007			
			ome (including dividendar ar amounts)	. F	280,891			280,891
	4		tment of tax-exempt bond	⊢	0			
	5	Royalties		▶	0			
			(ı) Real	(II) Personal				
	6а b	Gross Rents Less rental	12,996 18,054					
		expenses Rental income	-5,058					
		or (loss)	·	<u> </u>	-5,058			-5,058
	d	Net rental incor	me or (loss) (ı) Securities	► (II) O ther	-3,030			-3,030
	7a	Gross amount from sales of assets other than inventory	8,461,584	254,341				
	Ь	Less cost or other basis and	8,354,649	109,541				
	c	sales expenses Gaın or (loss)	106,935	144,800				
	d	Net gaın or (los	s)		251,735			251,735
Other Revenue	8a	Gross income fi events (not incl \$ 670, of contributions See Part IV, lin	luding ,431 reported on line 1c)					
‡	ь		penses b	130,677				
0	c 9a		loss) from fundraising	events 🕦	-130,677			-130,677
	_	See Part IV , lin	а					
	b c		penses b loss) from gaming activ	vities	0			
		Gross sales of returns and allo	inventory, less owances .					
	Ь	Less cost of a	a oods sold b	1,139,853 347,406				
	С		loss) from sales of inve		792,447	776,274	16,173	
		Miscellaneous	s Revenue	Business Code				
	l _	Royalties		900,099	278,429			278,429
	b	Miscellaneous I	Income	900,099	270,333			270,333
	C	All other rece						
	d e	All other revenu		<u> </u>				
				.	548,762			
	12	Total revenue.	See Instructions	▶[35,282,146	1,281,774	67,680	945,653

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete commit (A) but are not required to ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations			,	<u>·</u>
	in the U.S. See Part IV, line 21	165,622	165,622		
2	Grants and other assistance to individuals in the				
_	U S See Part IV, line 22	6,060	6,060		
3	Grants and other assistance to governments,	0,000	0,000		
3	organizations, and individuals outside the U.S. See				
	Part IV, lines 15 and 16	910,606	910,606		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	121,115	120,630	214	271
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	6,792,554	6,765,316	12,023	15,215
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	33,772	33,636	60	76
9	Other employee benefits	98,069	97,655	173	241
10	Payroll taxes	469,147	467,266	830	1,051
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	1,640,331	1,340,741	62,661	236,929
с	Accounting	75,718	61,889	2,892	10,937
d	Lobbying	0	,	,	,
e	Professional fundraising See Part IV, line 17	378,354			378,354
f	Investment management fees	0			
g	Other	11,005,077	9,001,096	419,179	1,584,802
12	Advertising and promotion	0	3,002,030	125,215	1,00.,002
13	Office expenses	999,249	795,210	3,361	200,678
14	Information technology	0	733,210	3,301	200,070
15	Royalties	0			
16	Occupancy	1,049,786	1,005,172	4,542	40,072
17	Travel	1,036,009	969,417		59,050
		1,036,009	969,417	7,542	39,030
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0	20.054	440	
20	Interest	120,889	89,954	410	30,525
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	86,451	64,329	293	21,829
23 24	Other expenses Itamize expenses not severed above (Expenses	0			
4 4	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Printing and Publications	2,727,474	1,990,561	110	736,803
b	Postage and Shipping	3,539,235	2,689,520	737	848,978
С	Media & Press Support	1,005,785	961,452	133	44,200
d	General Operating Expenses	1,081,145	847,977	5,932	227,236
e	Education, Promo Communication	2,396,076	2,013,958	96	382,022
f	All other expenses	53,202	51,280	204	1,718
25	Total functional expenses. Add lines 1 through 24f	35,791,726	30,449,347	521,392	4,820,987
26	Joint costs. Check here ► ✓ If following SOP 98-2				<u> </u>
	Complete this line only if the organization reported in				
	column (B) joint costs from a combined educational	8,518,166	6,107,581	74,739	2,335,847
	campaign and fundraising solicitation	3,310,100	1 5,107,301	. 1,733	2,333,017

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
-	1	Cash—non-interest-bearing			1,054,975	1	196,265
	2	Savings and temporary cash investments			4,192,546	2	112,580
	3	Pledges and grants receivable, net	_		104,707	3	106,361
	4	Accounts receivable, net	-		885,017	4	2,016,263
	5	Receivables from current and former officers, directors, trustees	s. kev	emplovees, and	,		<u> </u>
		highest compensated employees Complete Part II of	,,,	p.o, cco, aa			
		Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and			
		Schedule L				6	0
ssets	7	Notes and loans receivable, net				7	0
8	8	Inventories for sale or use			264,847	8	315,742
⋖	9	Prepaid expenses and deferred charges			619,343	9	613,105
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	1,224,805			
	ь	Less accumulated depreciation	10b	795,480	558,960	10c	429,325
	11	Investments—publicly traded securities			16,932,350	11	17,996,404
	12	Investments—other securities See Part IV, line 11				12	0
	13	Investments—program-related See Part IV, line 11		13	0		
	14	Intangible assets				14	0
	15	Other assets See Part IV, line 11			44,118	15	108,486
	16	Total assets. Add lines 1 through 15 (must equal line 34)			24,656,863	16	21,894,531
	17	Accounts payable and accrued expenses .			4,638,330	17	2,081,703
	18	Grants payable		18			
	19	Deferred revenue	23,728	19	351,762		
	20	Tax-exempt bond liabilities		20			
ē	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ΞĮΠ		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			2,267,930	25	2,264,094
	26	Total liabilities. Add lines 17 through 25			6,929,988	26	4,697,559
Ģ		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete li	nes 27			
Fund Balance		through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets			12,621,090		10,946,429
õ	28	Temporarily restricted net assets			2,064,237		3,214,277
핕	29	Permanently restricted net assets			3,041,548	29	3,036,266
Fu		Organizations that do not follow SFAS 117, check here ► an	d com	plete			
or	30	lines 30 through 34.				30	
Assets	30 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building or equipment fund				31	
\$ 51	31	Retained earnings, endowment, accumulated income, or other fu				32	
	33	Total net assets or fund balances	iius		17,726,875		17,196,972
Net		Total liabilities and net assets/fund balances					
l	34	i otal navinties and net assets/fund balances			24,656,863	34	21,894,531

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		No

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

People for the Ethical Treatment

Department of the Treasury Internal Revenue Service

h

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

Public Charity Status and Public Support

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

Inspection

Employer identification number

of Animals Inc Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(4). 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 Type III - Other ∏ Туре I **b** Type II c Type III - Functionally integrated 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) 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 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) Yes No 11g(i) and (III) below, the governing body of the the supported organization?

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) lis your gove docume	e ion in ted in irning	(v) Did you no organizat col (i) of suppoi	tify the ion in your	(vi) Is th organizat col (i) org in the U	e Ion in Ianized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
				1		1			
Total									

(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?

Provide the following information about the supported organization(s)

11g(ii)

11g(iii)

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.)

	(Complete only if y	ou checkeu the	bux on line 5,	7, OI O OI Pait	1.)		
	ection A. Public Support endar year (or fiscal year beginning	(-) 200F	(h) 2006	(a) 2007	(4) 2009	(=) 2000	(5) Total
	ın)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do no						
	include any "unusual	29,668,56	28,377,55	30,746,691	31,977,871	32,987,039	153,757,725
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its						0
	behalf						
3	The value of services or facilities						
	furnished by a governmental unit						0
	to the organization without charge						
4	Total. Add lines 1 through 3	29,668,56	28,377,55	30,746,691	31,977,871	32,987,039	153,757,725
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						19,843,297
	supported organization) included on line 1 that exceeds 2% of the						19,643,297
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5						133,914,428
S	from line 4 ection B. Total Support						
	endar year (or fiscal year	(-) 200F	(h) 2006	(-) 2007	(4) 2000	(-) 2000	(5) T - t - l
	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	A mounts from line 4	29,668,567	957,502	30,746,691	31,977,871	32,987,039	153,757,725
8	Gross income from interest,						
	dividends, payments received on securities loans, rents,	512,533	957,502	902,913	575,592	572,316	3,520,856
	royalties and income from	,	,	, j	,	,	, ,
	sımılar sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly						0
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						0
	from the sale of capital						
11	assets Total support (Add lines 7						157.270.501
	through 10)						157,278,581
12	Gross receipts from related activit	ies, etc (See ins	tructions)			12	7,744,808
13	First Five Years If the Form 990 is	for the organizat	ion's first, secon	d, thırd, fourth, or	fıfth tax year as a	501(c)(3) organı	— '
	check this box and stop here						►
S	ection C. Computation of Pu	blic Support	Percentage				
14	Public Support Percentage for 200			e 11 column (f))		14	85 140 %
15	Public Support Percentage for 200	8 Schedule A , P	art II, line 14			15	84 910 %
16a	33 1/3% support test—2009. If the	·	•	ox on line 13, and	line 14 is 33 1/3%		
	and stop here. The organization qu						₽V
b	33 1/3% support test—2008. If the	-			6a, and line 15 is	33 1/3% or more,	- -
17-	box and stop here. The organization			-	no 12 16 o o 16	h and lina 14	►
L/a	10%-facts-and-circumstances test is 10% or more, and if the organization						
	in Part IV how the organization me						ted
	organization			_			▶ ┌
b	10%-facts-and-circumstances test						
	15 is 10% or more, and if the orga Explain in Part IV how the organiza			•		-	,
	supported organization	acion meets the	iacis anu circum	stances test inc	a organization qua	imes as a publicly	′ ▶⊏
18	Private Foundation If the organiza	tion did not chec	k a box on line 13	3, 16a, 16b, 17a c	or 17b, check this	box and see	
	instructions						▶ □

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
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						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493031008641

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

Se	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete F	Part II-B [Do i	not co	mplete Pari	t II-A	
If the	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line	35a (re	gar	ding	proxy tax), then	
Se	ction 501(c)(4), (5), or (6) organizations Complete Part III						
		nployer	ıde	ntıfıca	tion numb	er	
	pple for the Ethical Treatment Animals Inc						
	t I-A Complete if the organization is exempt under section 501(c) or is a se	2-12183			anizatio		_
FGII	tion complete if the organization is exempt under section 501(c) or is a se	Cuons	<u> </u>	, or a	ainzatio	711.	_
1	Provide a description of the organization's direct and indirect political campaign activities in Part 1	V					
2	Political expenditures	F		\$			_
3	Volunteer hours						_
							_
Par	t I-B Complete if the organization is exempt under section 501(c)(3).						_
1	Enter the amount of any excise tax incurred by the organization under section 4955	ı	•	\$			_
2	Enter the amount of any excise tax incurred by organization managers under section 4955	I		\$			_
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	✓ No	
4a	Was a correction made?				☐ Yes	✓ No	
ь	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except se	ection	50	1(c)	(3).		_
1	Enter the amount directly expended by the filing organization for section 527 exempt function activ	vities 🖡	-	\$			_
2	Enter the amount of the filing organization's funds contributed to other organizations for section 52	7					
	exempt funtion activities	•	-	\$			_
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17	b F	-	\$			
4	Did the filing organization file Form 1120-POL for this year?				┌ Yes	┌ No	_
5	State the names, addresses and employer identification number (EIN) of all section 527 political of were made. For each organization listed, enter the amount paid from the filing organization's funds contributions received that were promptly and directly delivered to a separate political organization fund or a political action committee (PAC). If additional space is needed, provide information in Page 1.	Alsoent n, such a	ter	the ar	nount of po	olitical	

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

i Subtract line 1f from line 1c If zero or less, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768 ((election
	Check If the filing organization belongs to a			
В	Check I if the filing organization checked bo Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	949	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	22,948	
c	Total lobbying expenditures (add lines 1a and 1	b)	23,897	
d	Other exempt purpose expenditures		35,980,401	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	36,004,298	
f	Lobbying nontaxable amount Enter the amount to	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expendi	tures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	15,235	91,819	68,458	23,897	199,409
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	11,837	61,802		949	142,124

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1i						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\ <u>\</u>		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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As Filed Data

DLN: 93493031008641

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization People for the Ethical Treatment of Animals Inc 52-1218336 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

'ar	Titl Organizations Maintaining Co	llections of Art	, Hist	toric	<u>al Trea</u>	sur	es, or (<u> </u>	r Similai	r Asse	ts (co.	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	e follo	wing that	t are	a sıgnıfıc	ant u	ise of its co	llection	1	
а	Public exhibition		d	Γ	Loan or e	excha	nge prog	rams				
b	Scholarly research		e	Γ	Other							
с	Preservation for future generations											
1	Provide a description of the organization's co Part XIV	ollections and expla	ın how	they	further th	he or	ganızatıoı	n's ex	cempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
Pai	t IV Escrow and Custodial Arrang						answere	d "Y	'es" to Foi	m 990),	
	Part IV, line 9, or reported an ar											
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	diary f	for co	ntributioi	ns or	other as:	ets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	followi	ng tal	ble		г		ı			
							-			A mou	ınt	
c	Beginning balance						-	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	1										
Pa	rt V Endowment Funds. Complete											
		(a)Current Year	(b)	Prior Y		(c) Two	Years Bac	k (d	Three Years	Back (e)Four Ye	ars Back
a	Beginning of year balance	5,105,785			584,257			-				
b	Contributions	4,462,220			546,742			-				
C	Investment earnings or losses	17,832			121,767							
d	Grants or scholarships											
e	Other expenditures for facilities and programs	3,335,294		4,	146,981							
f	Administrative expenses											
g	End of year balance	6,250,543		5,	105,785							
2	Provide the estimated percentage of the yea	r end balance held a	as		I							
а	Board designated or quasi-endowment	%										
_												
Ь	Territation endowment P											
c la	Term endowment 51 420 % %	acion of the organiza		ha+ a=	ما ما ما			d 6 0 =	+h o			
a	Are there endowment funds not in the posse organization by	ssion of the organiza	וויייים ווייים	iiat ai	e ilelu ai	iu au	iiiiiistere	u ioi	tile		Yes	No
	(i) unrelated organizations									3a(i)		Νο
	(ii) related organizations									3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organization					•				3b		No
	Describe in Part XIV the intended uses of th											
a i	t VI Investments—Land, Building	s, and Equipme	nt. Se	<u>ee Fo</u>	rm 990	, Par	t X, line	10.	T			
	Description of investment				Cost or otl		(b) Cost or basis (otl		(c) Accum deprecia		(d) Bo	ok value
a	Land				91	,170						91,170
b	Buildings				137	,016	5	5,997		87,824		105,189
c	Leasehold improvements		•									
d	Equipment						73	1,981		550,645		181,336
e	Other						20	8,641		157,011		51,630

429,325

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12
Part VIII Investments—Program Related. See		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value
		(-)
		+
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		T
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	2.264.004	
Annuities Payable	2,264,094	
		1
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	2,264,094	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	35,282,146
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	35,791,726
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-509,580
4	Net unrealized gains (losses) on investments	4	-20,325
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2
9	Total adjustments (net) Add lines 4 - 8	9	-20,323
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-529,903
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	35,851,917
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 93,959		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	569,771
3	Subtract line 2e from line 1	3	35,282,146
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	35,282,146
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	36,381,820
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	590,096
3	Subtract line 2e from line 1	3	35,791,724
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	2
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	35,791,726

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Rounding \$2
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Rental expenses \$18054 Cost of goods sold \$347406 Direct expenses - special events \$130677
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Rental expenses \$18054 Cost of goods sold \$347406 Direct expenses - special events \$130677
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Rounding \$2
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	Permanently restricted net assets are comprised of three separate endowment funds. Under the terms of the first endowment fund, 20% of the ordinary earnings from investments are permanently restricted while 35% are available for unrestricted use and the remaining 45% are donated to other organizations. Earnings on the second and third endowment fund are unrestricted Temporarily restricted assets are available for campaigns against animal testing and for periods after July 31, 2010.

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As Filed Data -

DLN: 93493031008641

Employer identification number

52-1218336

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

of Animals Inc

Name of the organization

People for the Ethical Treatment

SCHEDULE F

(Form 990)

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

	"Yes" to Form 9	•				
1	_	_			the amount of the grant	
					lection criteria used to a	
	the grants or assistan	ıce?				. 🔽 Yes 🗌 No
2	For grant makers. Descri United States	be in Part IV the	organization's pr	ocedures for monitoring th	ne use of grant funds outsid	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) If add	ditional space is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Tota	nls ▶	0	0			0

			al space is needed.	(-) ()	(6) Manager 5	(-) ()	(1) D	CD Markland of
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	A nimal Protection	94,667	Wire			
		South Asia	A nimal Protection	6,000	Wire			
		South Asia	A nimal Protection	416,337	Wire			
		Europe	A nimal Protection	25,000	Wire			
		East Asia	A nimal Protection	73,991	Wire			
		East Asia	A nimal Protection	284,161	Wire			
			Isted above that are tee or counsel has pr					6
			entities					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of cash grant dısbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Part IV Supplemental Information Complete this part to	r mation provide the information required	ın Part I, line 2, and any addıtıonal information.
Identifier	ReturnReference	Explanation
Grantmaker's Description of How Grants are Used in Foreign Country		PETA monitors the use of grant funds outside the US through an internal donation request form specifying information that allows management to evaluate that the entity will use the funds exclusively for exempt purposes

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As Filed Data -

DLN: 93493031008641

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2009

Open to Public Inspection

Peo	ne of the organization ple for the Ethical Treatmen nimals Inc	t					Employer iden 52-1218336	tification number
	rt I Fundraising Ac	tivities. Completes are not required			tion answered "Yes" s part.	to Form		, line 17.
	Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have or key employees listed in If "Yes," list the ten highes to be compensated at leas	olicitations s a written or oral agre i Form 990, Part VII st paid individuals or	eement wi) or entity	e f g th any inc in conne (fundraise	Solicitation of nor Solicitation of gov Special fundraisin dividual (including office action with professional forms) pursuant to agreements.	n-governm vernment ng events rs, directo fundraisin ents unde	nent grants grants ors, trustees g activities? r which the fun	
	(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contribu Yes	er have dy or ol of	(iv) Gross receipts from activity	(or re- fundrais	ount paid to cained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
			ies	140				
Tota	al				417,408		513,615	43,464

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

WV,WI,WA,VA,UT,TN,SC,RI,PA,OR,OK,OH,NY,NM,NJ,NH,ND,NC,MS,MO,MN,MI,ME,MD,MA,LA,KY,KS,IL,HI,GA,FL,DC,CT,CO,CA,AZ,AR,AL,AK

		(a) Eve Los Angele (event	s Event	(b) Event #2 New York Event (event type)	(c) O ther Events 4 (total number)	(d) Tot (Add col co		
MUE	1 Gross receipts		413,050	97,888	159,493		670	0,431
Revenue	2 Less Charitable contributions		413,050	97,888	159,493		670	0,431
	3 Gross income (line 1 minus line 2)							
	4 Cash prizes							
မှာ (၁)	5 Non-cash prizes .							
Expenses	6 Rent/facility costs .							
	7 Food and beverages .							
Direct	8 Entertainment							
莅	9 Other direct expenses		20,253	20,809	89,615		130	0,677
	10 Direct expense summary	Add lines 4 through 9	ın column (d	d)	🛌		130	0,677
	11 Net income summary Co	mbine lines 3, column	d, and line 1	0			-130	0,677
Par	Gaming. Complete \$15,000 on Form 990	f the organization a)-EZ, line 6a.	nswered "Y	es" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e than	1
Revenue		(a) Bır		(b) Pull tabs/Instant ngo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1 Gross revenue							
မှာ က	2 Cash prizes							
Expenses	3 Non-cash prizes							
	4 Rent/facility costs .							
D_reg	5 Other direct expenses							
	6 Volunteer labor	. Г Yes		Yes	│ Yes% │ No			
	7 Direct expense summary							
	8 Net gaming income summa	rry Combine lines 1, c	olumn d, and	line 7	<u> </u>		Yes	No
9	Enter the state(s) in which the Is the organization licensed to	= :				. 9a	103	10
а								
a b	If "No," Explain							1
	Were any of the organization's If "Yes," Explain	gaming licenses revok	ed, suspend	ed or terminated during	the tax year?	10a		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493031008641

OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury

Name of the organization

of Animals Inc

People for the Ethical Treatment

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990 Internal Revenue Service

Employer identification number

52-1218336

Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use

	•	,					·
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPCA of Texas2400 Lone Star Drive Dallas,TX 75212	751216660	501(c)(3)	88,980	0			Anımal Protection
Foundation to Support Animal Protection501 Front Street Norfolk,VA 23510	521842274	501(c)(3)	17,054	0			Anımal Protection
Chimp Haven13600 Chimpanzee Place Keithville, LA 71047	742766663	501(c)(3)	8,000	0			Anımal Protection

Enter total number of section 501(c)(3) and government organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
1	6,000			
1	60			
		recipients cash grant 1 6,000	recipients cash grant non-cash assistance 1 6,000	recipients cash grant non-cash assistance (book, FMV, appraisal, other) 1 6,000

Ident if ier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		PETA monitors the use of grant funds in the U.S. through an internal donation request form specifying information that allows management to evaluate that the entity will use the funds exclusively for exempt purposes

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization People for the Ethical Treatment of Animals Inc

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

52-1218336

Pa	rt I Types of Property			,	32-1210330			
		(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of de reven	etermi	nıng	
	Art—Works of art	applicable		1 g				
	Art—Historical treasures .							
4								
	Books and publications Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	37	321,695	Market Value			
10	Securities—Closely held stock $$.							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Q ualified conservation contribution—O ther							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts			04.505				
	Other ► (<u>Various</u>)	X	58	84,606	FM V			
	Other ►()							
	Other ►()							
28	Other ► () Number of Forms 8283 received							
29	for which the organization compl		<u>-</u>		29		. 1	
30~	During the year, did the organiza	ition receiv	e hy contribution any propo	rty reported in Part I. lines	1-28 that it		Yes	No
30 a	must hold for at least three year							
	for exempt purposes for the entire				a to be used	20		No
L	• • •					30a		- NO
31	If "Yes," describe the arrangeme Does the organization have a gif			eview of any non-standard	contributions?	31	Yes	
J∠đ	Does the organization hire or use contributions?	e third parti		· · · · · · · · ·		32a	Yes	
ь	If "Yes," describe in Part II						I	
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	Explanation
Part I, Line 32, Hire and Use of Third Parties		PETA sold some jewelry items through an auction house, which takes a percentage, PETA used Ebay and Craigslist to sell some items, vehicle donations run through VDAC which accepts, processes, sells, and then distributes the money in the form of a grant to PETA, and the same situation occurs with timeshares, which are handled through Donate for a Cause

Schedule M (Form 990) 2009

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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

2009

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

Name of the organization
People for the Ethical Treatment of Animals Inc

Employer identification number 52-1218336

ldentifier	Return Reference	Explanation					
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The specified documents are made available at the Board of Director's discretion					
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	Lines 15a and 15b - Persons who receive compensation are precluded from voting on matters pertaining to their compensation. The President and the Director of Human Resources of a supporting organization evaluate the reasonableness of Officers' compensation, which is based on comparable remuneration for similarly qualified persons with consideration of background, experience, education and organizational knowledge in similarly situated environments. Deliberations of the governing body are verbal with decisions regarding compensation arrangements documented in the personnel files.					
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Regular confirmation and certification by board members and through internal controls put into place					
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	The audit committee and the Controller of a supporting organization review the Form 990 with the General Counsel and Vice President of Corporate Affairs of the same supporting organization. The audit committee and the supporting organization's Controller discuss the Form 990 with the organization's independent auditors. The organization files the Form 990 after Board of Director approval and acceptance.					
Form 990, Part III, Line 4d	Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 CRUELTY FREE MERCHANDISE PROGRAM - PETA encourages and facilitates cruelty-free living by providing educational materials and consumer products, such as cosmetics and household cleaners that are not tested on animals, animal care products, message T-shirts, educational videos and books, animal rescue equipment, and campaign materials that are used by concerned people around the world. These items are available online through the PETA Mall, the PETA Catalog, and the PETA Bookstore.					

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DLN: 93493031008641

OMB No 1545-0047

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Name of the organization People for the Ethical Treatment of Animals Inc

Department of the Treasury

Internal Revenue Service

Employer identification number

52-1218336

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

Primary activity

Legal domicile (state or foreign country)

Total income

(e) End-of-year assets

(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state or foreign country)

(d) Exempt Code section

(e) Public charity status (if section 501(c)(3))

Direct controlling entity

See Additional Data Table

Part III	Identification of Related Organizations Taxal	ble as a Partnership (Co	mplete if the organization answere	d "Yes" on Form	990, Part I\	√, line 34
	because it had one or more related organizations t	treated as a partnership dur	ing the tax year.)			
	(c)	(-)		(h)	(i)	

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Predominant income (related, unrelated, excluded from tax under sections 512-514)

(f) Share of total income (g) Share of end-of-year assets (h) (i)
Disproprtionate allocations? Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

(j) General or managing partner?

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c)
Legal domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f)
Share of total income
(g)
Share of end-of-year assets

(h) of Percentage year ownership

(6)

Part	V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
N	lote. C	Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Dur	ing the	e tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a F	Receip	t of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty	1a		No
b	Sift, gr	ant, or capital contribution to other organization(s)	1 b	Yes	
c 0	ift, gra	ant, or capital contribution from other organization(s)	1 c		No
d L	oans (or loan guarantees to or for other organization(s)	1d	Yes	
e L	oans (or loan guarantees by other organization(s)	1e		No
f S	ale of	assets to other organization(s)	1f		No
g F	urcha	se of assets from other organization(s)	1g		No
h E	xchar	nge of assets	1h		No
i L	ease o	of facilities, equipment, or other assets to other organization(s)	1i		No
i l	ease c	of facilities, equipment, or other assets from other organization(s)	1j	Yes	
		mance of services or membership or fundraising solicitations for other organization(s)	1k		No
		nance of services or membership or fundraising solicitations by other organization(s)	11	Yes	
		g of facilities, equipment, mailing lists, or other assets	1m		No
	_	g of paid employees	1n		No
		2 -			
o F	Reimbi	ursement paid to other organization for expenses	10	Yes	
		ursement paid by other organization for expenses	1 p	Yes	
a () ther t	transfer of cash or property to other organization(s)	1 q		No
		ransfer of cash or property from other organization(s)	1r		No
2 I	fthe a	nswer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (b)			
		(d) Transaction		(c) t involv	ed
1) 2)					
_,					
3)					
4)					
- \					
-)					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity (b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)

section 501(c)(3) organizations? Yes No (e) Share of end-of-year assets (f) Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

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EIN: 52-1218336

Name: People for the Ethical Treatment

of Animals Inc

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
PETA Australia	Protection of animal	AS	N/A	N/A	N A
PO Box 20308 Sydney NSW 2002 AS	rights				
PETA France 6 Place De La Madeleine Paris 75008 FR	Protection of animal rights	FR	N/A	N/A	NA
PETA Asia GPO Box 1700 HK	Protection of animal rights	нк	N/A	N/A	N/A
PETA India PO Box No 2 Pune 411011 IN	Protection of animal rights	IN	N/A	N/A	NA
PETA Foundation PO Box 36678 London SE1 1YE UK	Protection of animal rights	UK	N/A	N/A	NA
PETA Deutschland EV Dieselstr 21 Gerlington 21 70839 GM	Protection of animal rights	GM	N/A	N/A	N A
Stitching PETA Nederland Wittevrouwensignel Utrecht 1023514 AM NL	Protection of animal rights	N L	N/A	N/A	NA
PETA Europe Limited PO Box 36668 London SE1 1WA UK	Protection of animal rights	UK	N/A	N/A	NA
Foundation to Support Animal Protection 501 Front Street Norfolk, VA23510 52-1842274	Support services to certain animal protection organizations	V A	501 (c)(3)	11 Type I	NA

Additional Data

Software ID:

Software Version:

EIN: 52-1218336

Name: People for the Ethical Treatment

of Animals Inc

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Printing and Publications	2,727,474	1,990,561	110	736,803
Postage and Shipping	3,539,235	2,689,520	737	848,978
Media & Press Support	1,005,785	961,452	133	44,200
General Operating Expenses	1,081,145	847,977	5,932	227,236
Education, Promo Communication	2,396,076	2,013,958	96	382,022