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.

OMB No 1545-0047

Open to Public Inspection

Web site; NM / A Yes	Ā	For the 2	002 calendar year, or tax year period beginning OCT 1, 2002 and ending SEP 30, 2	2003	
Second Process Sec	В	Check if	Place C Name of organization D Em	ıployer i	dentification number
Received		applicable) F 10d30		
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Personner VERO BEACH Ft 3.2961 - 0.644	Ē	Final	Instruc-		
Section 507 (c)(3) organizations and 4947(q(1) enexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Web site: ►N/A Organization type @vascion.per X Sol(c) (3)	F	Amende			>
Web site: NYA Organization type (back owned)	Ē	Applica	tion Section 501(c)(3) organizations and 4947(a)(1) nonexampt charitable trusts		
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Organization type Inchest not	G	Web site			
K Check here ▶ If the organization's gross receipts are normally not more than \$25,000. The organization need not the a return with the RIS, but if the organization received a Form's 90 Package in the malt, a fould life a return without financial data. Some states require a complete return. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 449, 318. L Coross receipts: Add lines 8b, 8b, 9b, and 10b to line 12 ▶ 3, 49, 8b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9					
organization need not life a return with the IRS; but if the organization received a Form 900 Package in the mail, it should file a return whith tell files. Some states require a complete return. L Gross recepts: Add lines 68, 80, 90, and 10b to line 12 ▶ 3, 449, 318. M Check ▶ 1 the organization is not required to attain the file of the	_		if the organization's gross receipts are normally not more than \$25,000. The (If "No," attach a list.)		
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Gross recepts: Add lines 6b, 8b, 9b, and 10b to line 12 3,449,318 M Check of the organization is not required to atta Sch. 8 from 990,990-EZ, or 990-PF).				- B	100 22 110
Part	_		· · · · · · · · · · · · · · · · · · ·	organiza	tion is not required to attach
Part Revenue, Expenses, and Changes in Net Assets or Fund Balances	1	Gross red			
1 Contributions, grifs, grants, and similar amounts received: a Direct public support b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 2,387,356. noncash \$ 68,050.) 2 Program service review including government fees and contracts (from Part VII, line 93) 2 Program service review including government fees and contracts (from Part VII, line 93) 3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 a Gross rents b Less; rental expenses c Not rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe ▶ 8 a Gross amount from sale of assets other than linentory b Less; cost or other basis and sales expenses c Gain or (loss) (attach schedule) 3 Gross renue (not including \$ 0. of contributions reported on line 1a) 5 Decal events and activities (attach schedule) a Gross renue (not including \$ 0. of contributions reported on line 1a) b Less; cost of goods sold c Gross profit or (loss) from special events (subtract line 9b from line 9a) c Ret income or (loss) from special events (subtract line 9b from line 9a) c Ret income or (loss) from special events (subtract line 9b from line 9a) c Ret revenue (not including \$ 0. of contributions reported on line 1a) c Gross profit or (loss) from special events (subtract line 9b from line 9a) c Ret revenue (not more), less returns and allowances c Not income or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events (subtract line 10b from line 10a) c Gross profit or (loss) from special events or from line 12a c Gross profit or (loss) from special events or from	_			,	
Bound Continue C	۰	T			
b Indirect public support					
C Government contributions (grants) C Cash \$ 2 , 387 , 356		1 .		4	
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17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 17 1, 709, 234 18 1,689,626 19 9,212,193	ë	14		-	
17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 17 1, 709, 234 18 1,689,626 19 9,212,193	ě	15	Fundraising (from line 44, column (D))	$\overline{}$	228,024.
17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 17 1, 709, 234 18 1,689,626 19 9,212,193	E X III	16	Payments to affiliates (attach schedule)		
Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) OGDEN, UT 19 9,212,193		1	Total expenses (add lines 16 and 44, column (A)) [5] MAY 2 0 2004	$\overline{}$	1,709,234.
Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) OGDEN, UT 19 9,212,193		18	Excess or (deficit) for the year (subtract line 17 from line 12)	1	1,689,626.
	썱	ខ្លី 19			9,212,193.
	ž	2 20	1 1/2071 W UT 1		0.
1 21 10, 301, 013		21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	10,901,819.

HUMANE SOCIETY OF VERO BEACH AND INDIAN RIVER COUNTY, FL, INC.

Part II Functional Expenses	ınd (4) organı	zations and section 4947((a)(1) nonexempt charitable	trusts but optional for othe	ers.
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
cash \$noncash \$	22				
23 Specific assistance to individuals (attach sched	jule) 23				
24 Benefits paid to or for members (attach schedu					
25 Compensation of officers, directors, etc.	25	58,557.	31,035.	22,837.	4,685.
26 Other salaries and wages	26	578,878.	478,073.	60,791.	40,014.
27 Pension plan contributions	27	13,344.	11,171.	1,803.	370.
28 Other employee benefits	28	107,499.	90,422.	10,601.	6,476.
29 Payroll taxes	29	47,541.	37,899.	6,257.	3,385.
30 Professional fundraising fees	30	10 143	10 050		101
31 Accounting fees	31	19,143. 13,952.	18,952.	5,462.	191. 2,490.
32 Legal fees	32	62,124.	6,000. 46,755.	5,404.	15,369.
33 Supplies	33	24,299.	16,251.	6,187.	1,861.
34 Telephone	35	24,233.	10,231.	0,10/.	1,001.
35 Postage and shipping	36	144,481.	51,787.	7,625.	85,069.
36 Occupancy	36	60,468.	53,748.	240.	6,480.
37 Equipment rental and maintenance	38	56,816.	35,125.	1,130.	20,561.
38 Printing and publications39 Travel	38	6,647.	6,647.	1,130.	20,301.
	40	0,047.	0,047.		
40 Conferences, conventions, and meetings 41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	78,566.	58,524.	14,324.	5,718.
43 Other expenses not covered above (itemize):	72	70,300.	30,324.	11,521.	3,710.
8	43a				
b	43b				
c	43c				
d	43d				
e See Statement 4		436,919.	383,221.	18,343.	35,355.
e See Statement 4 Total functional expenses (add lines 22 through 43), Organizations completing columns (B)-(D), carry these totals to lines	13-15 44	1,709,234.	1,325,610.	155,600.	228,024.
Joint Costs. Check If you are following S					
Are any joint costs from a combined educational ca	mpaign and f	undraising solicitation rep	orted in (B) Program servi	ces? ▶□	Yes X No
If "Yes," enter (i) the aggregate amount of these join	nt costs \$;(ii) the amount allocated to	Program services \$;
(iii) the amount allocated to Management and gene	eral \$; and (iv) the amount allocated to		· · · · · · · · · · · · · · · · · · ·
Part III Statement of Program Se	ervice Ac	complishments			
What is the organization's primary exempt purpose	? ▶				
PROVIDE SHELTER & PREVI	ENT CR	JELTY TO AN	IMALS		Program Service Expenses
All organizations must describe their exempt purpose achievachievements that are not measurable (Section 501(c)(3) and					(Required for 501(c)(3) and
allocations to others)	(4) Organization	G MIG 4047 (d) 17 Holloxollipt C		and amount or granto and	(4) orgs, and 4947(a)(1) trusts, but optional for others)
a THE HUMANE SOCIETY OF	F VERO	BEACH AND	INDIAN RIVER	COUNTY, INC	
CONDUCTS SEVERAL PROC				TO	
PROMOTE WELFARE AND I			ALS.		
6,158 ANIMALS WERE SI	•		Grants and allocations \$)	478,405.
b 1,247 ANIMALS WERE PI	LACED :	IN HOMES BY	ADOPTION		
					400 640
- 1 (10 100 100			Grants and allocations \$)	403,648.
c 1,618 LOST PETS WERE	REUNI'	red With thi	EIR OWNERS		
		·			
			Name and 10 - 11	 .	101 001
d mile opganica argo	DROTT		Grants and allocations \$)	101,081.
d THE ORGANIZATION ALSO			EDUCATION		
AND OUTREACH PROGRAMS	5 TO 0	VER 6,000 II	NDIVIDUALS		
			Propto and allegations for	,	122 700
Other program convece (attach schedule)	C+-+		Grants and allocations \$ Grants and allocations \$		123,798.
Other program services (attach schedule) Total of Program Service Expenses (should e		<u> </u>		<u> </u>	218,678. 1,325,610.
	yuai iiile 44, (olullii (D), Flografii Serv	1000)		· · · · · · · · · · · · · · · · · · ·
223011 01-22-03					Form 990 (2002)

Part IV Balance Sheets

Note:		re required, attached schedules and amounts will be for end-of-year amounts only.	thin the de	escription column	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			35,284.		1,763.
	46	Savings and temporary cash investments		<u> </u>	4,370,365.	46	2,131,175.
	47 a	Accounts receivable Less: allowance for doubtful accounts	47a 47b	193,145.	20,970.	47c	193,145.
	48 a b	Pledges receivable Less: allowance for doubtful accounts	48a 48b	2,357,263. 7,258.	2,036,455.	48c	2,350,005.
	49 50	Grants receivable Receivables from officers, directors, trustees, and key employees		-		49 50	
Assets	51 a b 52		51a 51b			51c	
	53 54	Prepaid expenses and deferred charges Investments - securities	>	Cost FMV	19,461.	53 54	73,415.
	55 a	Investments - land, buildings, and equipment: basis	55a				
	56	Less: accumulated depreciation Investments - other	55b			55c 56	
	57 a b 58	Land, buildings, and equipment basis Less: accumulated depreciation Stmt 6 Other assets (describe	57a 57b	7,038,837.	3,299,521.	57c	6,861,799.
	59	Total assets (add lines 45 through 58) (must equal lii	ne 74)	,	9,782,056.	59	11,611,302.
	60 61	Accounts payable and accrued expenses Grants payable			569,863.	60 61	269,483.
Liabilities	62 63 64 a	Deferred revenue Loans from officers, directors, trustees, and key emple Tax-exempt bond liabilities	loyees	-		62 63 64a	
Liab		Mortgages and other notes payable Other liabilities (describe		\$tmt 7		64b 65	440,000.
	66	Total liabilities (add lines 60 through 65) nizations that follow SFAS 117, check here ► X	and com-	plete lines 67 through	569,863.	66	709,483.
ces	67	69 and lines 73 and 74. Unrestricted	and comp	piete iiiles o7 tillough	8,007,483.	67	10,885,842.
d Balan	68 69	Temporarily restricted Permanently restricted			1,204,710.	68 69	15,977.
or Fun	Organ	nizations that do not follow SFAS 117, check here 70 through 74. Capital stock, trust principal, or current funds	an	d complete lines		70	
Net Assets or Fund Balances	70 71 72	Paid-in or capital surplus, or land, building, and equip Retained earnings, endowment, accumulated income.		unds -		70 71 72	
Net	73	Total net assets or fund balances (add lines 67 throicolumn (A) must equal line 19; column (B) must equal Total liabilities and net assets / fund balances (add	ugh 69 or li al line 21)	nes 70 through 72;	9,212,193. 9,782,056.	73 74	10,901,819. 11,611,302.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

HUMANE SOCIETY OF VERO BEACH AND INDIAN

		TY, FL, INC			59-08631	
Part IV-A Reconciliation of R				econciliation of Exp		
Financial Statemen	ts with	Revenue per		nancial Statements eturn	with Expens	ses per
Return a Total revenue, gains, and other support		T		es and losses per		
per audited financial statements	▶a	3,445,317.	audited finance	cial statements	▶ a 1,	754,980.
b Amounts included on line a but not on			b Amounts incline 17, Form	uded on line a but not on 990:		•
line 12, Form 990: (1) Net unrealized gains			(1) Donated servi	ices		
on investments \$			(2) Prior year adj	*		
(2) Donated services			reported on li			
and use of facilities \$		i i	Form 990	nic 20,		
· · · · · · · · · · · · · · · · · · ·			(3) Losses report	• • • • • • • • • • • • • • • • • • •		
(3) Recoveries of prior						
year grants \$	 }		line 20, Form			
(4) Other (specify): Stmt 8 \$ 46,4	157		(4) Other (specify Stmt 9	,,. \$45,7	146	
		46,457.			40.	15 716
Add amounts on lines (1) through (4)	► b	3,398,860.		on lines (1) through (4)		<u>45,746.</u> 709,234.
c Line a minus line b	▶ <u>c</u>	3,330,000.	1	-	► c 1,	109,234.
d Amounts included on line 12, Form 990 but not on line a:			d Amounts incl 990 but not o	uded on line 17, Form in line a:		
(1) Investment expenses			(1) Investment ex	xpenses		
not included on			not included o	on		
line 6b, Form 990 \$			line 6b, Form	990 \$		
(2) Other (specify):			(2) Other (specify	y):		
\$				\$		
Add amounts on lines (1) and (2)	▶d	0.	Add amounts	on lines (1) and (2)	▶ d	0.
e Total revenue per line 12, Form 990			e Total expense	es per line 17, Form 990		
(line c plus line d)	▶ e	3,398,860.	(line c plus lin	ne d)	▶ e 1,	709,234.
Part V List of Officers, Direc	tors, Tr	ustees, and Key E	Employees (List	each one even if not comper	isated.)	
(A) N			(B) Title and average		(D) Contributions to employee benefit plans & deferred	(E) Expense account and
(A) Name and ac	adress		per week devoted position	d to (If not paid, enter	plans & deferred compensation	other allowances
JANE L. CAMMANN		<u> </u>	PRESIDENT			
	601					
VERO BEACH, FL 32966			2	0.	0.	0.
DEBBIE A. VICKERS			1ST VICE-I	PRESIDENT		
1672 STONECROP STREET						
SEBASTIAN, FL 32958	. – – – .		2	0.	0.	0.
CHALMERS I. MORSE			2ND VICE-I	PRESIDENT		·
307 SABLE OAK DRIVE					İ	
VERO BEACH, FL 32963	· ·		2	0.	0.	0.
THOMAS E. McDEVITT			3RD VICE-I			
1715 45TH AVENUE						
VERO BEACH, FL 32966			2	0.	0.	0.
CYNTHIA WEBB-HASKETT			SECRETARY			
2095 SPRING PLACE			j			
VERO BEACH, FL 32963			2	0.	0.	0.
DAVID K. BROWER			TREASURER			
736 34TH TERRACE						
VERO BEACH, FL 32968			2	0.	0.	0.
JOAN G. CARLSON			EXEC-DIREC	CTOR		
2016 14TH AVENUE S.W.						
VERO BEACH, FL 32962			40	58,557.	2,118.	0.
			<u> </u>			
75 Did any officer, director, trustee, or key em				·		
organizations, of which more than \$10,000) was provi	ded by the related organiz	ations? If "Yes," attach	h schedule. 🕨 🔲 Yes [X No	Form 990 (2002)

HUMANE SOCIETY OF VERO BEACH AND INDIAN

		<u> 1863199</u>		Page 5
Pa	rt VI Other Information		Yes	-
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement			
80 a				
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	х	
b	Con Chalamant			
_	and check whether it is exempt or nonex			
81 a	Taril 1	0.		
0, <u>1</u>		816		x
82 a		0.0		
02 a	fair rental value?	82a	ŀ	x
_		02a		
b				
	expense in Part II. (See instructions in Part III.) 82b N/A		v	
83 a		83a	X	
Ь		83b	<u> </u>	
84 a	•	84a		X
b	, , , , , , , , , , , , , , , , , , ,			
	tax deductible?	84b		<u> </u>
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		₩
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		<u> </u>
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy t	ax		ļ
	owed for the prior year.			
C	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		ļ	
g	37/3	85g		
h		dues		
	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A			
ь	27/2			
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A			
o. b				
•	against amounts due or received from them.) 87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			
00	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?			
	If "Yes," complete Part IX	88	i	x
gn -	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:	00		_ <u>^</u>
טס מ		0.		
	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	- 		
U				Ì
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?	001		₹.
	If "Yes," attach a statement explaining each transaction	89b	L	X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			^
	sections 4912, 4955, and 4958			<u>0.</u>
	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a				
b	,		225	<u> 25</u>
91	The books are in care of ► DOROTHY RITCHEY Telephone no. ► 772	<u>:-388-3</u>	331	<u></u>
	4701 410m omporer 1900 per e-		_	
	Located at ► 4701 41ST STREET VERO BEACH, FL	4 ► <u>3296</u>	2	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here	•	_▶[
22304	and enter the amount of tax-exempt interest received or accrued during the tax year	<u>N/</u>		(00
01-22	o3	Forn	n 990	(2002)

HUMANE SOCIETY OF VERO BEACH AND INDIAN
Form 990 (2002)

RIVER COUNTY, FL, INC.

Part VII | Analysis of Income-Producing Activities (See page 31 of the instructions.) 59-0863199 Page 6

Note: Enter gross amounts unless otherwise	Unce	lated business income		ded by section 512, 513, or 514	
indicated.	(A)	(B)	(C)	(D)	(E)
	Business	Amount	Exclu- sion	Amount	Related or exempt function income
93 Program service revenue:	code		code		
a ADOPTION FEES					23,847.
b					
C					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agence	ies				260,727.
94 Membership dues and assessments					
95 Interest on savings and temporary cash inve	estments		14	33,862.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property			1		
b not debt-financed property			 		
98 Net rental income or (loss) from personal pr	ronerty		Ì		
	Toporty		 		
••	<u> </u>	_		· · · · · · ·	
100 Gain or (loss) from sales of assets			10	4 710	
other than inventory	<u> </u>		18		
101 Net income or (loss) from special events			01	169,223.	
102 Gross profit or (loss) from sales of inventor	у		02	-680.	
103 Other revenue:					
a THRIFT SHOP SALES			05	461,187.	
b		· · · · · · · · · · · · · · · · · · ·			
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		658,880.	284,574.
105 Total (add line 104, columns (B), (D), and (E))			•	943,454.
Note: Line 105 plus line 1d, Part I, should ed	qual the amount on line	12, Part I.			
Part VIII Relationship of Activit	ies to the Accom	plishment of Exemp	ot Pur	rposes (See page 32 of the	instructions.)
Line No. Explain how each activity for which	income is reported in colu	ımn (E) of Part VII contribute	d import	tantly to the accomplishment	of the organization's
exempt purposes (other than by pro			- ···· F -	,	
93a ADOPTION FEES COV	ZER A PORTIC	N OF THE COST	r OF	CARING FOR T	HE ANIMALS.
93g MONIES COLLECTED	-				
Jog Holling Connecting	11.011 1111 00	01111 01 111011	441 41	2 7 221 1 011 12111	III COMINOLI
Part IX Information Regarding	Taxable Subsidi	aries and Disregard	led Er	ntities (See page 32 of the	instructions)
(A)		(C)		(D)	(E)
Name, address, and EIN of corporation,	(B) Percentage of	Nature of activities		Total income	End-of-year
partnership, or disregarded entity ow	nership interest %				assets
37/3					
N/A	%				
	%				
	<u>%</u>				
Part X Information Regarding					
(a) Did the organization, during the year, received	ve any funds, directly or ii	ndirectly, to pay premiums or	i a perso	onal benefit contract?	Yes X No
(b) Did the organization, during the year, pay p	oremiums, directly or indir	ectly, on a personal benefit c	ontract?		Yes X No
Note: If "Yes" to (b), file Form 8870 and Fo	orm 4720 (see instructi	ons).			
		companying schedules and nformation of which prepar	d stateme er has an	nts, and to the best of my knowled y knowledge	. /
		-13-04	INE (-AMMANN Presi) F M 1
		ite T	ype or p	orint name and title	
		Land Da	ite	Check If	Preparer's SSN or PTIN

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

HUMANE SOCIETY OF VERO BEACH AND INDIAN

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer identification number

OMB No 1545-0047

RIVER COUNTY, FL, INC. <u>59 0863199</u> Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours (d) Contributions to (e) Expense (a) Name and address of each employee paid employee benefit plans & deferred compensation per week devoted to (c) Compensation account and other more than \$50,000 position allowances EXEC-DIRECTOR JOAN G. CARLSON 2016 14TH AVENUE SW VERO BEACH, FL 340 58,557 2,118 Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service Total number of others receiving over \$50,000 for professional services

HUMANE SOCIETY OF VERO BEACH AND INDIAN Schedule A (Form 990 or 990-F7) 2002 RIVER COUNTY FI. INC.

3011801	THE A (FORTH 990 OF 990-CZ) 2002 RIVER COUNTY, FL, INC.	TA	7 -	aye z
Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
pu loi	blic opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the obyging activities (Must equal amounts on line 38, Part VI-A,			
	line i of Part VI-B.)	1		<u> </u>
Or	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking			
" Y	es," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2 Du	iring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,			
tru	stees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such			
pe	rson is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"			
at	tach a detailed statement explaining the transactions)			
a Sa	le, exchange, or leasing of property?	2a		<u> </u>
hle	nding of money or other extension of credit?	2b		X
D L0	Training of money of other oxidition of orotal.			
c Fu	rnishing of goods, services, or facilities?	2c	-	X
d Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
, T-	profes of any part of its income or accete?	2e		х
e 11	ansfer of any part of its income or assets?			
3 Do	es the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3		Х
	you have a section 403(b) annuity plan for your employees?	4		Х
	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans			
from I	in furtherance of its charitable programs "qualify" to receive payments.			
Par	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)			
The or	panization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(ı).			
6	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city,			
	and state			
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).			
44.	(Also complete the Support Schedule in Part IV-A.)			
11a	An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
116	Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11b 12	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
12	receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of			
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired			
	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
	, and an arrange of the second			
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations describ	ed ın:		
	(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)			
	Provide the following information about the supported organizations. (See page 5 of the instructions.)			
	(a) Name(s) of supported organization(s)		e num om abo	
14	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

HUMANE SOCIETY OF VERO BEACH AND INDIAN INC

FL,

Schedule A (Form 990 or 990-EZ) 2002 RIVER COUNTY,

your return. Do not include these grants in line 15.

223121 01-22-03

Page 3

59-0863199

Schedule A (Form 990 or 990-EZ) 2002

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year (a) 2001 (b) 2000 (c) 1999 (d) 1998 (e) Total beginning in) Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) ,522,820 2,077,688 331,844 416,212 <u>7,348,564.</u> 134,602 124,604 113,707 372,913. Membership fees received 16 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 567,166 841,535. 2,277,976. 530,538 338,737. charitable, etc., purpose 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 100,444 224.643. 165.873. 112.679. 603,639. Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 2.152.859. 1,981,335. 23 Total of lines 15 through 22 3,464,799. 3,004,099. 10,603,092. Line 23 minus line 17 2,623,264. 2,436,933. 1,622,321. 1,642,598. 8,325,116. 24 Enter 1% of line 23 19,813 25 34,648. 30.041. 21,529. 166,502. ▶ 26a 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. 101,418. Do not file this list with your return. Enter the sum of all these excess amounts 26b 325,116. c Total support for section 509(a)(1) test; Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 603.639. 19 1,705,057. 22 26b 26d 6,620,059. 26e e Public support (line 26c minus line 26d total) 26f 79.5191% Public support percentage (line 26e (numerator) divided by line 26c (denominator)) Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of N/A such amounts for each year: (2001)(1998)b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5.000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2001)(2000)(1999)(1998)Add: Amounts from column (e) for lines: 16 21 27c N/A 27d N/A Add: Line 27a total and line 27b total N/A 27e Public support (line 27c total minus line 27d total) Total support for section 509(a)(2) test: Enter amount on line 23, column (e) N/APublic support percentage (line 27e (numerator) divided by line 27f (denominator)) N/A 27g % h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h N/A Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with

None

HUMANE SOCIETY OF VERO BEACH AND INDIAN

Schedule A (Form 990 or 990-EZ) 2002 RIVER COUNTY, FL, INC.

b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement.

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,

59-0863199 Page 4

Pa	rt V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
20	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		ĺ
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			ĺ
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	_		
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	-	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	ļ	<u> </u>
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			l
	admissions, programs, and scholarships?	32c		<u> </u>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	_		
33	Does the organization discriminate by race in any way with respect to:	_		
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c	-	
a -	Scholarships or other financial assistance?	33d		
e	Educational policies? Use of facilities?	33e 33f		
1	Athletic programs?	330		
h	Other extracurricular activities?	33h		
"	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	3311		
	Tryou answered Tes to any or the above, please explain. (If you need more space, attach a separate statement,)	_		
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		ĺ

Schedule A (Form 990 or 990-EZ) 2002

34b

HUMANE SOCIETY OF VERO BEACH AND INDIAN

Schedule A (Form 990 or 990-EZ) 2002 RIVER COUNTY, FL, INC. 59-0863199 Part VI-A | Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) If you checked "a" and "limited control" provisions apply. Check ► a if the organization belongs to an affiliated group. Check ▶ b (a) **Limits on Lobbying Expenditures** Affiliated group To be completed for ALL totals electing organizations (The term "expenditures" means amounts paid or incurred.) N/A 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 36 Total lobbying expenditures to influence a legislative body (direct lobbying) 37 Total lobbying expenditures (add lines 36 and 37) 38 39 Other exempt purpose expenditures 39 Total exempt purpose expenditures (add lines 38 and 39) 40 41 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 20% of the amount on line 40 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 41 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 42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 43 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 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 45 through 50 on page 11 of the instructions.) Lobbying Expenditures During 4-Year Averaging Period N/A Calendar year (or (a) (e) (C) 2002 2001 2000 1999 fiscal year beginning in) Total 45 Lobbying nontaxable 0. amount 46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable 0. amount 49 Grassroots ceiling amount (150% of line 48(e)) 0. 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any attempt to Yes No **Amount** influence public opinion on a legislative matter or referendum, through the use of: a Volunteers Paid staff or management (Include compensation in expenses reported on lines c through h.) Media advertisements Mailings to members, legislators, or the public e Publications, or published or broadcast statements Grants to other organizations for lobbying purposes Direct contact with legislators, their staffs, government officials, or a legislative body Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means Total lobbying expenditures (Add lines c through h.) If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

HUMANE SOCIETY OF VERO BEACH AND INDIAN Schedule A (Form 990 or 990-EZ) 2002 RIVER COUNTY, FL, 59-0863199 Page 6 INC Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Yes No a Transfers from the reporting organization to a noncharitable exempt organization of: X (i) Cash 51a(i) (ii) Other assets a(ii) X **b** Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization b(ii) (ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets b(iii) (iv) Reimbursement arrangements b(iv) b(v) X (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations Х c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A (b) (d) (a) (c) Name of noncharitable exempt organization Amount involved Description of transfers, transactions, and sharing arrangements Line no. 52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the X No Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule: N/A (c)
Description of relationship (a) Name of organization (b) Type of organization

Amount Of Depreciation	0	.609,6	2,182.	34,183.	26,898.	3,023.	2,671.	78,566.	
Current Sec 179						-		0	
Accumulated Depreciation					87,539.	4,310.	6,623.	98,472.	
Basis For Depreciation	540,700.	411,030.	2042300.	3555000.	448,525.	28,645.	12,637.	7038837.	
Reduction In Basis								0	
Bus % Excl									
Unadjusted Cost Or Basis	540,700.	411,030.	2042300.	3555000.	448,525.	28,645.	12,637.	7038837.	
No		016	016	016	16	016	16		
Life		15.0016	39.0016	39.0016	7.00	10.0016	7.00		!
Method	н								
Date Acquired	VariesL	VariesSL	VariesSL	VariesSL	VariesSL	VariesSL	VariesSL		
Description	1LAND	2LAND IMPROVEMENTS	3BUILDING - RC	4BUILDING - AC	& EQUIPMENT		c	iotai 330 rage ipr	
Asset		(1)	(*)	7	u)	¥			

(D) - Asset disposed

Form 990 Gain	n (Loss)	From	Sale of	Oth	er A	ssets		Sta	tement	1
Description				Date quir	ed	Date Sold		Meth Acqui		
ASSETS ABANDON			Va	riou	 s	Variou	s	PURCH	IASED	
Name of Buyer	Gross Sales Pr	-	Cost co			ense Sale	Depr	ec	Net Ga	
		0.	108,2	238.		0.	103,	526.	-4,7	12.
To Fm 990, Part I, ln	8		108,2	238.		0.	103,	526.	-4,7	12.
Form 990	Specia	ıl Eve	nts and	l Act	ivit	ies		Sta	tement	2
Description of Event	Gro Rece	ss eipts	Contri Inclu		-	ross venue		ect enses	Net Incom	ıe
CAUSE FOR PAWS OPEN HOUSE GOLF TOURNAMENT	1	7,760. .,470. 2,971.				87,760. 1,470. 22,971.	_	753.	161,0 1,4 6,7	70.
To Fm 990, Part I, line	e 9 212	2,201.	<u> </u>		2	12,201.	42,	978.	169,2	23.

Form 990	Income and Cost of Goods Sold Included on Part I, Line 10		Statement :
Income			
2. Returns and al	llowances	2,088	2,08
	sold (line 13) (line 3 less line 4)	2,768	-680
7. Merchandise pu 8. Cost of labor 9. Materials and 10. Other costs	peginning of year	2,768	2,76
	end of year sold (line 11 less line 12)		2,76

Form 990	Othe	r Expenses		Statement 4
	(A)	(B) Program	(C) Management	(D)
Description	Total	Services	and General	Fundraising
ADVERTISING ANIMAL ASSISTANCE	16,353.	14,617.	104.	1,632.
AND MAINTENANCE DUES AND	191,345.	191,345.		
SUBSCRIPTIONS	2,208.	2,208.		
INSURANCE	79,544.	61,955.	6,404.	11,185.
OFFICE EXPENSE	13,976.	9,600.	4,129.	247
PROMOTIONAL	5,212.	5,212.	-,	
SECURITY	3,691.	3,661.		30.
UNIFORMS	3,865.	3,771.		94.
UTILITIES	88,649.	72,870.	7,106.	8,673.
VEHICLES	10,726.	9,030.	7,1001	1,696.
PUBLIC EDUCATION	2,251.	2,251.		2,050.
PROGRAM SUPPORT	7,920.	6,701.	600.	619.
COMMISSIONS	11,179.	0,7021	000.	11,179
Total to Fm 990, ln 43	436,919.	383,221.	18,343.	35,355.
Form 990	Other Pr	ogram Service	s	Statement 5
Form 990 Description	Other Pr		s Grants and Allocations	Statement 5
			Grants and	
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200	ACTIVE) (31,1		Grants and	Expenses 83,171. 43,626.
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part	ACTIVE) (31,1	00 HOURS)	Grants and Allocations	Expenses 83,171. 43,626. 91,881.
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part	ACTIVE) (31,1 III, line e ion of Assets	00 HOURS) Not Held for	Grants and Allocations	Expenses 83,171, 43,626, 91,881.
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part Form 990 Depreciat Description	ACTIVE) (31,1 III, line e ion of Assets	Not Held for Cost or her Basis	Grants and Allocations Investment Accumulated Depreciation	Expenses 83,171, 43,626, 91,881, 218,678. Statement 6
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part Form 990 Depreciat Description LAND	ACTIVE) (31,1 III, line e ion of Assets	00 HOURS) Not Held for Cost or her Basis 540,700.	Grants and Allocations Investment Accumulated Depreciation	Expenses 83,171. 43,626. 91,881. 218,678. Statement Book Value 540,700.
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part Form 990 Depreciat Description LAND LAND IMPROVEMENTS	ACTIVE) (31,1 III, line e ion of Assets	Not Held for Cost or her Basis 540,700. 411,030.	Grants and Allocations Investment Accumulated Depreciation 0. 9,609.	Expenses 83,171, 43,626, 91,881, 218,678. Statement Book Value 540,700, 401,421,
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part Form 990 Depreciat Description LAND LAND LAND IMPROVEMENTS BUILDING - RC	ACTIVE) (31,1 III, line e ion of Assets	00 HOURS) Not Held for Cost or her Basis 540,700. 411,030. 2,042,300.	Grants and Allocations Investment Accumulated Depreciation 0. 9,609. 2,182.	Expenses 83,171, 43,626, 91,881, 218,678. Statement Book Value 540,700, 401,421, 2,040,118.
Description CRUELTY INVESTIGATION VOLUNTEER PROGRAMS (200 PET BEHAVIOR Total to Form 990, Part Form 990 Depreciat Description LAND LAND IMPROVEMENTS	ACTIVE) (31,1 III, line e ion of Assets	Not Held for Cost or her Basis 540,700. 411,030.	Grants and Allocations Investment Accumulated Depreciation 0. 9,609.	Expenses 83,171, 43,626, 91,881, 218,678. Statement Book Value 540,700, 401,421,

HUMANE SOCIETY OF VERO BEACH AND	INDIAN		59-0863199
LEASEHOLD IMPROVEMENTS - TS EQUIPMENT - TS	28,645. 12,637.	7,333. 9,294.	21,312. 3,343.
Total to Form 990, Part IV, 1n 57	7,038,837.	177,038.	6,861,799.

Form 990		Other No	tes	and Loans Pay	able	Statement	7
Lender's	Name	Term	s of	Repayment			
WACHOVIA CREDIT	BANK - LINE	OF INTE	REST	ONLY MONTHLY			
Date of Note	Maturity Date	Origina Loan Amou		Interest Rate			
09/17/03	09/30/04	1,300,	000.	1.75%			
Security	Provided by	Borrower	Pu	rpose of Loan			
BUILDING	S		CO	NSTRUCTION	•		
Relation	ship of Lend	er					
NONE							
Descript:	ion of Consi	deration			FMV of Consideration	Balance Due	e
	- M				0.	440,00	00.
Total ind	cluded on Fo	rm 990, Par	t IV	, line 64, Co	lumn B	440,00	00,
Form 990	0	ther Revenu	e No	t Included on	Form 990	Statement	
		ther Revenu	e No	t Included on	Form 990	Statement	8
Descript: SPECIAL I		SES	e No	t Included on	Form 990	Amount 42,9	

Form 990	Other Expenses Not Included on Form 99	00 St	atement	9
Description			Amount	
SPECIAL EVENTS COST OF RETAIL			42,9 2,7	
Total to Form	990, Part IV-B		45,7	46.
Form 990	Identification of Related Organization Part VI, Line 80b	ons St	atement	10
Name of Organia	zation	Exempt	NonExe	mpt
HUMANE SOCIETY COUNTY, FL FOU	OF VERO BEACH AND INDIAN RIVER	×		

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions.

Attach to your tax return.

990

Business or activity to which this form relates

OMB No 1545-0172

Identifying number

HUMANE SOCIETY OF VERO BEACH AND INDIAN 59-0863199 RIVER COUNTY, FL, INC. Form 990 Page 2 Part | Election To Expense Certain Tangible Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 3 \$200,000 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instruction (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property. Enter amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2003. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II | Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election (see instructions) 15 32.592 16 Other depreciation (including ACRS) (see instructions) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2002 17 18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2002 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery period (a) Classification of property 19a 3-year property 5-year property b 7-year property C 10-year property d 411,030. S/L 9,609 15-year property 20-year property f 25-year property 25 yrs S/L q 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L S/L 34,183 05/03 3,555,000. ММ 39 yrs. i Nonresidential real property 2.182 09/03 2,042,300.39 MM S/L Section C - Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L b S/L C 40-year 40 yrs. MM Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 78,566. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

P	art V Listed Proper			ertaın ot	her vehic	cles, cell	ular tele	phone	s, certain	compute	rs, and	propert	y used fo	or enterta	inment,
	recreation, or a Note: For any			ısına the	standar	rd mileac	ne rate o	r dedu	ictina leas	e expens	e. comi	olete on	lv 24a. 2	24b. colu	mns (a)
	through (c) of	Section A, ali	of Section B,	and Sec	ction C il	applica	ble.				-,,			,	
Se	ction A - Depreciation a	nd Other In	formation (Ca	aution: 3	See instr	uctions	for limits	for pa	ssenger a	utomobi	les.)				
248	Do you have evidence to	support the bu	siness/investm	ent use cl	aımed?	<u> </u>	es	No.	24b If "Y	es," is th	e eyide	nce writ	ten?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percenta	: _,	(d) Cost or ther basis	Libus	(e) sis for depre siness/inve use only	stment	(f) Recovery period	Met	g) hod/ ention	Depr	(h) eciation luction	Elec section	(i) cted on 179 ost
25	Special depreciation all		 	 1	/ placed	ın servi	ce durine	a the t	ax		1				
	year and used more that		•		, p.a.coa			.			25				
26	Property used more tha											•			
	*	l		%									-		
				%											
		<u> </u>		%											
27	Property used 50% or l	ess in a qual	ified business	use:											
			,	%						S/L -]	
_				%					ļ	S/L·				ļ	
		<u> </u>	<u> </u>	%					<u>l</u>	S/L -	-т			1	
28	Add amounts in column	n (h), lines 25	through 27. E	nter her	e and or	n line 21,	, page 1				28				
29	Add amounts in column	ı (ı), line 26. E	nter here and	on line	7, page	1							29	l	
			•	Section	B - Infor	mation	on Use	of Vel	nicles						
	mplete this section for ve				-						•				
•	ou provided vehicles to y se vehicles.	your employe	es, first answ	er the q	Jestions	in Secti	on C to	see if	you meet	an excep	tion to	complet	ing this	section fo	or
				T		Γ		ι		1		1			
				1	a)	1	b)		(c)		d)		(e)	(1	
30	Total business/investment		luring the	Vel	hicle	Vel	hicle	<u> </u>	/ehicle	Veh	ıcle	Ve	hicle	Veh	ıcle
	- '					 		 							
	year (do not include commuting miles) Total commuting miles driven during the ye Total other personal (noncommuting) miles		•			 						-			
32	,	ncommuting	g) miles												
	driven .						-					-		<u> </u>	
33	Total miles driven during									•					
	Add lines 30 through 32		-1	<u> </u>			1	 ,,					1	 _	
34	Was the vehicle availab	ne for person	iai use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
25	during off-duty hours?	mmonily by o	moro	-			1						 	-	
33	Was the vehicle used p	• •	more		1										
26	than 5% owner or related is another vehicle available.	•	· ·	-		 	<u> </u>	 							
30	use?	ine in heist	Jilai				1								
_		Section C	- Questions	for Emn	lovere V	Vho Pro	vide Vel	hiclas	for Lieo h	y Their F	molove		_l	·J	
And	swer these questions to			•	_					•			re not m	ore than	5%
	ners or related persons.		,	жорио.	, 10 00	.p.og		D .O. 1	07.110.100 00					1070 111411	0,0
	Do you maintain a writte	en policy stat	tement that p	rohibits a	all person	nal use o	of vehicl	es. inc	ludina coi	nmutina.	bv vou	 r	_	Yes	No
	employees?	,									-,,			1	1
38	Do you maintain a writte	en policy stat	tement that p	rohibits į	personal	use of v	/ehicles,	excep	t commut	ing, by y	our		•		1
	employees? See instruc	ctions for veh	ncles used by	corpora	te office	rs, direc	tors, or	1% or	more own	ers				i	
39	Do you treat all use of v	ehicles by ei	mployees as p	ersonal	use?										
40	Do you provide more th	an five vehic	les to your en	ployees	, obtain	ınformat	tion from	ı your	employee	s about					
	the use of the vehicles,								-						
41	Do you meet the require	ements conc	eming qualifie	d autom	obile de	monstra	ation use	?							
	Note: If your answer to	37, 38, 39, 4	40, or 41 is "Y	es," do r	ot comp	olete Sec	ction B f	or the	covered v	ehicles.					<u> </u>
P	art VI Amortization														
	(a) Description o	f costs	Date	(b) amortization begins		(c) Amortizat amount			(d) Code section		(e) Amortiza period or per		A) fo	(f) mortization or this year	
42	Amortization of costs th	at begins du	ırıng your 200	2 tax ye	ar.										
_															
	Amortization of costs th											43			
44	Total. Add amounts in	column (f). Se	ee instruction:	s for whe	ere to re	port						44			

59-0863199

HUMANE SOCIETY OF VERO BEACH AND [6489]

Depreciation Expense

9:28:59AM 1/15/2004

FY: 10/01/2002-09/30/2003

Sorted: (1) Tax Link

(2) System Number (3) Date In Service (4) None (5) None

Federal

For the Period: 10/1/2002 - 9/30/2003

1,065.00 57.00 6,888 00 147.00 163.00 600.00 403.00 204.00 204.00 204.00 230.00 951.00 951.00 275.00 634.00 195.00 31.00 150.00 42.00 1,123.00 906.00 591.00 43.00 2,629.00 5.00 1,000.00 256.00 406 00 265.00 2,259.00 58.00 259.00 296.00 11.00 40.00 100.00 855 00 414.00 3,699.00 Ending Accum. Depreciation 181.00 248.00 Current Depreciation 100.00 855.00 414.00 57.00 147.00 163.00 600.00 403 00 204.00 204.00 253.00 251.00 275.00 634.00 195.00 190.00 113 00 2,629.00 5.00 1,000.00 31.00 150 00 42 00 1,123 00 181.00 2,345.00 Beg. Accum. Depreciation 43.00 906.00 591.00 248 00 406 00 265 00 ,065.00 3,888.00 3,699.00 296.00 259.00 Salvage/ Basis Adj. Sec.179/ Bonus 100 0000 100.000 100.0000 100.0000 100.0000 100.0000 100.0000 100.0000 100.0000 100.0000 100.000 100.000 100 0000 100.000 100 0000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 0000001 100.000 100 0000 100.000 100.000 100.000 100 000 000000 000.000 100.000 000000 100.000 000000 Bus./ Inv. % Cost or Other Basis 250.00 179.00 100.00 855.00 414.00 1,065 00 190.00 113.00 2,629.00 43 00 163.00 600.00 403.00 990.00 204 00 204.00 5.00 57 00 147.00 951.00 275.00 634.00 195.00 232 00 256.00 31.00 150 00 42 00 906.00 591.00 181.00 248 00 406 00 265.00 58 00 259 00 000000 296 00 5,888 00 ,12300 3,699.00 2,259.00 15.0 Life 5.0 15.0 10.0 5.0 3.0 15.0 5.0 ₹ ₹ Method/ Convention 08/31/86 09/30/85 01/31/86 02/10/88 03/16/89 05/01/90 05/01/90 08/01/90 02/01/80 11/06/83 05/17/82 05/19/82 10/13/82 01/03/83 05/12/83 11/16/83 08/31/85 08/31/85 38/31/85 01/21/83 38/06/60 10/31/85 32/28/86 33/26/87 03/24/88 35/01/90 35/01/90 35/01/90 2/20/90 02/20/91 1/19/79 39/18/80 2/31/80 34/18/83 5/12/83 35/19/82 01/28/83 27/06/83 07/06/83 12/08/83 32/27/81 21/06/84 Date In Service OFFICE FURNITUI VIDEO EQUIPMEN OFFICE EQUIPME **BULLETIN BOAR** FIRE EXTINGUISH **4 X 6 REMARKAB** ANIMAL STRETCH **BULLETIN BOAR** MINKEL & SON C .S. RACKS & CO 2 FOUR DRAWER **MESSAGE BOAR** C& H DISTRIBUT CASH REGISTER LEGAL HANG FI 4 DRAWER FILE CAT CAGE CABI **AIRLINE CARRIE** FILE CABINETS ATERAL FILE 30 X 63 TABLE *KENNEL AIRE* CATCH POLE 5 DOG BEDS 10 BENCHES 990, Pg 2 #1 - Form 990, Page 2 CAT CAGES CAT TRAPS 6 52" FANS CABINETS CABINETS SHELVING SHELVING SHELVING CABINETS Description CABINETS SHELVES CAMERA HEATERS 20 BEDS CAGES BOWLS CAGES CAGES SIGNS SIGN 000 S System

Page 1 of 7

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HUMANE SOCIETY OF VERO BEACH AND [_6489]

Depreciation Expense

FY: 10/01/2002-09/30/2003

59-0863199

| Federal | Federal | For the Period: 10/1/2002 - 9/30/2003

Sorted: (1) Tax Link (2) System Number (3) Date In Service (4) None (5) None

			21 0400	/Postport	/200		20,000	, 5110	200 170/	Column	Bod Accum	Current	Ending Accum
System No.	S	Description	Service	Convention	ntion	Life	Other Basis	lnv. %	Bonus	Basis Adj.	Depreciation	Depreciation	Depreciation
990, Pg 2 #1 - Fc	orm 9	- Form 990, Page 2											
	۵	TRAP	03/30/84	정	∀	100	244.00	100 0000	0.00	0.00	244 00	0.00	244.00
47	Δ	WATER COOLER	08/22/84	ಭ	ĕ Z	30	25.00	100.0000	0.00	0.00	25 00	0.00	25.00
48	۵	MEDICAL EQUIP	09/24/84	જ	¥ X	3.0	244.00	100.0000	000	0.00	244.00	0.00	244.00
49	Δ	EQUIPMENT	08/31/85	성	۷ X	50	109.00	100.0000	00.0	0.00	109 00	000	109 00
20	Δ	REGFRIGERATO	09/30/85	정	∀	30	109.00	100.000	0.00	0.00	109 00	000	109 00
51		2010 LATHEM	11/30/85	യ	∢ Ż	7.0	200 00	100.0000	000	0.00	200.00	0.00	200.00
52	۵	SHELTER EQUIP	03/31/86	ซ	Α	7.0	385.00	100.0000	0.00	0.00	385.00	000	385 00
ន	۵	SHELTER EQUIP	04/30/86	ร	Α V	7.0	6,399.00	100.0000	0.00	0.00	6,399.00	000	00 668'9
54	۵	ANIMAL CARRIEF	04/30/86	ช	∀	7.0	97 00	100.0000	0.00	000	97.00	0.00	97.00
22	۵	SHELTER EQUIP	98/06/90	S	× ×	7.0	355.00	100.0000	0.00	0.00	355.00	0.00	355.00
26	۵	CAGE CARD HO	98/06/90	ร	Ϋ́	5.0	65.00	100.0000	0.00	0.00	65.00	0.00	65.00
57	۵	CARRIERS	12/04/86	S	Ϋ́	7.0	82 00	100.0000	0.00	000	82.00	00.0	82.00
28	۵	16 TRAPS	05/08/87	ร	ΑN	50	308.00	100.0000	0.00	000	308.00	0.00	308.00
29		40 DOG BOWLS	07/15/87	ซ	Š	30	177.00	100.0000	0.00	000	177.00	0.00	177.00
09	۵	CARRIERS	10/15/86	S	Ϋ́	7.0	178.00	100.0000	0.00	0.00	178.00	0.00	178.00
61	۵	SHELVES · CAT	10/16/86	ᅜ	∀	5.0	279.00	100.0000	0.00	000	279.00	0.00	279.00
62	۵	PET CARRIERS	09/10/87	정	∀	7.0	70.00	100.0000	0.00	000	20.00	0.00	20.00
æ	۵	PET CARRIERS	01/30/87	정	∀	7.0	106.00	100 0000	0.00	000	106.00	0.00	106.00
8	۵	8 FIRE EXTINGUIS	12/10/87	ಶ	∀	5.0	280.00	100.000	0.00	00.0	280.00	0.00	280.00
92	۵	CATCH POLES	05/23/88	જ	۷ N	50	168.00	100 0000	0.00	00.0	168.00	0.00	168.00
99	۵	KENNER EQUIP	06/03/88	ซ	۷ N	5.0	193.00	100.0000	000	0.00	193.00	0.00	193.00
29	۵	CARRIERS	10/27/87	ಜ	∀	50	162.00	100 0000	0.00	0.00	162.00	0.00	162.00
89	۵	KENNELS	02/25/88	മ	∀	50	368.00	100.0000	0.00	0.00	368.00	0.00	368.00
69	۵	CARRIERS	04/11/88	정	Ϋ́	5.0	82.00	100.0000	0.00	0.00	82 00	0.00	82.00
20	۵	KENNELS	08/04/88	정	۷ N	50	490.00	100.0000	0.00	0.00	490.00	0.00	490.00
71	۵	CENTRIFUSE	88/60/80	ช	₹ Z	5.0	1,100 00	100.0000	000	0.00	1,100.00	000	1,100.00
72	۵	KENNEL CAGES	06/12/89	정	۷ N	0.7	1,967.00	100.0000	0.00	0.00	1,967.00	0.00	1,967.00
73	۵	CAGE STATIONA	68/90/20	ᅜ	∢ Z	7.0	319 00	100.0000	000	0.00	319.00	000	319.00
74		THE DOG'S OUTF	12/01/89	ช	ΑX	3.0	1,902 00	100.0000	00 0	0.00	1,902.00	000	1,902.00
75	۵	DOG BOWLS	02/01/90	정	۷ X	3.0	98.00	100.0000	0.00	0.00	00 86	0.00	00 86
92	۵	SOFTWARE	02/01/90	ซ	ΑX	5.0	240.00	100.0000	0.00	0.00	240.00	000	240.00
2.2	۵	TOMOHAWK TR	04/01/90	ซ	Ϋ́	5.0	63.00	100.0000	0.00	0.00	83 00	0.00	83 00
78	۵	THE DOG'S OUTF	05/01/90	ช	Ϋ́	3.0	250 00	100.0000	0.00	0.00	250.00	000	250.00
62	۵	TOMOHAWK TR	07/01/90	ᅜ	Ϋ́	5.0	87.00	100.0000	0.00	0.00	87.00	0.00	87.00
80	۵	SAM'S WHOLESA	08/01/90	ᅜ	Ϋ́	3.0	40.00	100.0000	0.00	0.00	40.00	0.00	40.00
81	۵	ROTT HOME IMP	02/01/90	S	Ϋ́	5.0	128 00	100.0000	0.00	0.00	128.00	000	128.00
82	۵	FILE CABINET	01/01/91	ъ	Ϋ́	5.0	89.00	100.0000	0.00	0.00	89.00	0.00	89.00
æ	۵	SCALE	03/01/91	ร	∀ Z	5.0	990.00	100.0000	0.00	0.00	00 066	0.00	00'066
28	۵	PARALYSING GU	07/01/91	S	∀	5.0	26 00	100.0000	0.00	0.00	26.00	0.00	26 00
85		FEED & SEED	01/01/92	Տ	¥ Ž	7.0	889.00	100.0000	0.00	0.00	889.00	000	889.00
98	۵	APPLIANCE WAR	02/02/92	ഒ	Ϋ́	7.0	848.00	100.0000	0.00	0.00	848.00	000	848.00
87	۵	ANIMAL CARE E	03/01/92	ร	Ϋ́	7.0	86 00	100.0000	0.00	0.00	86.00	0.00	86.00
. 88		CLARK CAGES	03/01/92	정	Ϋ́	7.0	784.00	100.0000	0.00	0.00	784 00	000	784.00
-88	۵	SEWELL HARDW/	03/01/92	ร	A/N	7.0	76 00	100.0000	0.00	0.00	76.00	000	76.00

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HUMANE SOCIETY OF VERO BEACH AND [_6489]

9:28:59AM

FY: 10/01/2002-09/30/2003

59-0863199

Sorted: (1) Tax Link
(2) System Number (3) Date In Service (4) None (5) None

Depreciation Expense Federal

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(4) None (5) None	ne					1							
System No.	S	Description	Date In Service	Method/ Convention	hod/ intion	Life	Cost or Other Basis	Bus./ Inv. %	Sec.179/ Bonus	Salvage/ Basis Adj.	Beg. Accum. Depreciation	Current Depreciation	Ending Accum. Depreciation
990, Pg 2 #1	- Form 9	990, Page 2											
) () ()	۵	SHOR LINE	03/01/92	જ	Α×	7.0	220.00	100 0000	0.00	0.00	220.00	0.00	220.00
91	۵	ENVIRACAIRE	05/01/92	징	Α×	7.0	3,069.00	100.0000	0.00	0.00	3,069.00	0.00	3,069.00
92	۵	ANIMAL CARE E	07/01/92	ઝ	Α×	7.0	763 00	100.0000	000	00 0	763.00	0.00	763.00
93	۵	KANE'S APPLIAN	08/01/92	징	Α N	7.0	2,520.00	100.0000	0.00	0.00	2,520 00	0.00	2,520.00
94	۵	ENVIRACAIRE	08/01/92	ഒ	A/N	7.0	00.66	100.0000	0.00	0.00	99.00	000	99.00
95	۵	16 TRAPS	05/08/87	ಶ	Α×	50	450 00	100.0000	000	0.00	450.00	0.00	450.00
96	۵	CANON COPIER	11/30/92	정	Α×	50	6,989.00	100.0000	0.00	0.00	00 686'9	0.00	00'686'9
26		3 SHOW TENTS	02/19/93	정	Α×	7.0	450.00	100.0000	0.00	0.00	450 00	0.00	450.00
86	۵	LASER PRINTER ?	06/03/93	정	ΑX	50	850.00	100.0000	0.00	0.00	850.00	0.00	850.00
66	۵	120 TAPE BACK-L	06/03/93	ઝ	A/A	5.0	160.00	100.0000	0.00	0.00	160 00	0.00	160.00
100	۵	386SX/33 COMPL	06/03/93	ซ	Α¥	5.0	1,000.00	100.0000	0.00	0.00	1,000 00	0.00	1,000.00
101	۵	486DX/33 COMPL	06/03/93	ಶ	Ϋ́	5.0	2,200.00	100.0000	0.00	0.00	2,200.00	0.00	2,200.00
102	۵	386SX/33 COMPL	06/03/93	ช	A A	50	1,000.00	100.0000	0.00	0.00	1,000.00	0.00	1,000.00
103	۵	386SX/33 COMPL	06/10/93	ช	¥	50	1,000.00	100.0000	0.00	0.00	1,000.00	0.00	1,000.00
104	۵	SOFTWARE	06/28/93	RSL	¥	5.0	124.00	100 0000	0.00	0.00	124.00	0.00	124.00
105	۵	FAX MODEM	06/28/93	ช	Α	50	174.00	100.0000	0.00	0.00	174.00	0.00	174.00
106	۵	PANASONIC PRI	06/28/93	ช	ΑX	5.0	428.00	100.0000	0.00	0.00	428.00	0.00	428 00
107	۵	HOSE REEL	08/18/93	S	X	2.0	1.979.00	100,0000	0.00	0.00	1,979.00	0.00	1,979.00
108		SECURITY SYST	09/15/93	성	×	2.0	3,035.00	100 0000	0.00	0.00	3,035.00	0.00	3,035 00
109		4 KENNELS	02/15/93	S	×	2.0	269.00	100 0000	0.00	0.00	269.00	0.00	269 00
110	۵	MAYTAG DRYER	04/23/93	정	Ϋ́	7.0	245.00	100 0000	0.00	0.00	245.00	0.00	245 00
111		8 SMALL KENNEL	06/02/93	8	¥	7.0	363.00	100.0000	0.00	0.00	363.00	0.00	363.00
112		33 LARGE KENNE	06/16/93	જ	Ϋ́	7.0	2,361 00	100.0000	000	000	2,361.00	0.00	2,361.00
113		ACCOUNTING S	01/31/94	MSL	È	3.0	595 00	100 0000	0.00	0.00	595.00	0.00	295.00
114		SMART SUITE U	02/18/94	MSL	¥	3.0	270.00	100 0000	000	0.00	270 00	0.00	270.00
115		FAX MACHINE	02/28/94	ร	ΑX	7.0	00'089	100.0000	000	0.00	00 089	0.00	00:089
116	۵	TABLE	06/06/94	ಶ	Ϋ́	7.0	00 69	100.0000	0.00	00 0	00.69	0.00	00:69
117	□	CAT TRAP	11/24/93	징	Α Α	7.0	25.00	100.000	000	0.00	25 00	0.00	25.00
118						0.0	0.00	100.0000	000	0.00	000	0.00	0.00
119	۵	CALCULATOR	02/18/94	공	Ϋ́	7.0	20 00	100.0000	0.00	0.00	20.00	0.00	20.00
120		HANDLING CAGE	03/31/94	ಶ	Ϋ́	7.0	261.00	100.0000	000	0.00	261 00	0.00	261.00
121	۵	PLAY GROUND E	04/30/94	ช	¥	7.0	702.00	100.0000	0.00	0.00	702 00	0.00	702.00
122		TIME CLOCK	05/04/94	ೱ	¥	7.0	244.00	100.0000	0.00	0.00	244.00	0.00	244.00
123		SIGN HUMANE SC	05/04/94	ಶ	Ϋ́	7.0	80 00	100.0000	0.00	0.00	80.00	0.00	80.00
124	۵	NORSTOR/STAR	09/16/94	ร	¥	2.0	18,136.00	100.0000	0.00	0.00	18,136.00	0.00	18,136.00
125	۵	CATCH POLES	06/13/94	З	¥	7.0	172 00	100.0000	0.00	0.00	172.00	0.00	172.00
126		DODGE VAN	01/31/95	ช	Ϋ́	5.0	15,520 00	100.0000	0.00	0.00	15,520.00	0.00	15,520.00
127		REMOVABLE CA	02/28/95	ೱ	ΑX	5.0	9,394 00	100.0000	0.00	0.00	9,394.00	0.00	9,394.00
128	۵	BRONZE PLATE (12/12/94	ช	Ϋ́	7.0	172.00	100.0000	0.00	0.00	172.00	0.00	172.00
129		TWO LATERAL 4	01/23/95	ൃ	Ϋ́	7.0	856.00	100.0000	0.00	0.00	856.00	0.00	856.00
130		12 BENCHES FO	06/21/95	ಸ	Α	7.0	939.00	100 0000	0.00	0.00	939 00	0.00	939.00
131	۵	VCR	07/12/95	ช	ΑX	7.0	194 00	100.0000	0.00	0.00	194.00	0.00	194.00
132	۵	PRINTER	07/12/95	ร	Α/N	7.0	229.00	100.0000	0.00	0.00	229.00	0.00	229.00
133	۵	REFRIGERATOR	96/60/80	ช	¥	7.0	399.00	100.0000	0.00	0.00	399.00	0.00	399.00

1/15/2004	9:28:59AM
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HUMANE SOCIETY OF VERO BEACH AND [_6489]

Depreciation Expense

FY: 10/01/2002-09/30/2003

59-0863199

Federal For the Period: 10/1/2002 - 9/30/2003

Sorted: (1) Tax Link (2) System Number (3) Date In Service (4) None (5) None

System	S Description	Date In Service	Method/ Convention	hod/ ention	Life	Cost or Other Basis	Bus./ Inv. %	Sec.179/ Bonus	Salvage/ Basis Adi.	Beg. Accum. Depreciation	Current Depreciation	Ending Accum. Depreciation
0 20	000 Dage 9											
# v 6 L	- FOITH 990, FAYE Z LATERAL FILE	08/23/95	정	Š	7.0	397.00	100.0000	00 0	00:00	397.00	0.00	397.00
	LARGER DOG DR		정	¥ X	7.0	218.00	100.0000	00 0	0.00	218.00	0.00	218.00
136	D FIRE PANEL	05/05/95	ઝ	Ϋ́	7.0	695 00	100.0000	0.00	0.00	695.00	0.00	00 969
137	ZIP COMPUTER D	E 07/21/95	Ŋ	Α	7.0	205.00	100.0000	0.00	0.00	205.00	0.00	205.00
138	LAMINATOR	08/23/95	್	Ν Α	7.0	187.00	100.000	0.00	0.00	187.00	0.00	187.00
139	TV STAND - EDUC	C 12/06/95	정	Υ V	2.0	127 00	100.000	0.00	000	123.28	3.72	127 00
140	THREE BEEPERS	s 12/06/95	ಜ	V ∀	7.0	120.00	100.0000	0.00	0.00	116.28	3.72	120.00
141	3 SYRINGE POLE	E 12/06/95	ช	Ϋ́	7.0	107.00	100.0000	0.00	0.00	103.58	2.55	106.13
142	D SECURITY SYST	. 03/28/96	ช	Ϋ́	7.0	625 00	100 0000	0.00	0.00	579.58	45.42	625.00
143	DROP SAFE	04/25/96	ช	V V V	7.0	155.00	100.0000	0.00	0.00	141.28	12.92	154.20
4	VIDEO CAMERA	05/15/96	Ŋ	Ν	7.0	240 00	100 0000	0.00	000	218.58	20.00	238.58
145	A/C UNIT	12/31/02	ร	Ν	7.0	00 095'9	100.0000	0.00	0.00	0.00	702.86	702.86
146	COMPUTERS(FR	10/23/96	¥	¥	5.0	3,228 00	100 0000	0.00	000	3,228 00	0.00	3,228.00
147	GENERATOR	04/09/97	岁	È	5.0	2,175 00	100 0000	0.00	0.00	2,175.00	0.00	2,175.00
148	3 COMPUTERS	09/27/97	M	¥	5.0	3,967.00	100.0000	0.00	000	3,967.00	0.00	3,967.00
149	2 MONITORS	09/27/97	Æ	È	5.0	478.00	100.0000	0.00	0.00	478.00	0.00	478.00
150	PARADIGM SOF	08/31/97	MSL	¥	3.0	5,900.00	100.0000	0.00	0.00	5,900.00	0.00	5,900.00
151	D AIR CONDITIONE	10/30/97	S	Χ	2.0	1,252 00	100 0000	0.00	0.00	879.72	178.86	1,058.58
152	DRIVEWAY PAVI	01/17/03	ช	Ν	5.0	5,150 00	100.0000	0.00	00:0	000	2989	29:989
153	FILE CABINET	07/23/98	ช	ΑX	7.0	300 00	100 0000	0.00	00:0	178 72	42.86	221.58
154	DISPLAY BOARD		정	¥ X	5.0	325.00	100.0000	0.00	0.00	309.00	16.00	325.00
155	EGP USED COPI	_	ช	Ϋ́	7.0	795 00	100 0000	0.00	0.00	502.14	113.57	615.71
156	VETROL COMPUT	_	ಸ	Ν	5.0	280.00	100.0000	0.00	0.00	464.00	116.00	280 00
157	D AST COMPUTER		ᅈ	Ϋ́	5.0	1,404 00	100.0000	0.00	0.00	1,380 60	23.40	1,404.00
158	SIGN · TS		정	Ϋ́	5.0	715.60	100.000	0.00	0.00	0.00	11.93	11 93
159	D HAND HELD RAD	02/04/99	정	Ϋ́	7.0	750.00	100.0000	0.00	0.00	392.28	107.14	499 42
160	COPIER	05/28/99	ଷ	Ϋ́	5.0	7,500 00	100 0000	0.00	0.00	2,000.00	1,500.00	6,500.00
161	D AIR CONDITIONE	E 05/20/99	정	Ϋ́	7.0	540.00	100.0000	0.00	0.00	257.28	77.14	334 42
162	D WASHER	_	정	Ϋ́	7.0	435.00	100.0000	0.00	0.00	207.28	62.14	269 42
163 1	THRIFT SHOP IM	_	정	Ϋ́	10.0	9,533 40	100 0000	0.00	0.00	3,415 80	953.40	4,369.20
164	THRIFT SHOP - R	_	정	Ϋ́	7.0	00.096	100.0000	0.00	0.00	480.28	137.14	617 42
165	THRIFT SHOP · S	_	정	Ϋ́	2.0	205.17	100 0000	0.00	0.00	102.58	29.29	131.87
166	D DRYER	_	M	¥	7.0	455 00	100.0000	0.00	0.00	300 22	44.22	344.44
167	DIGITAL CAMER	_	M	¥	5.0	200 00	100 0000	0.00	0.00	413.60	27.60	471.20
168		07/22/99	Σ	¥	7.0	800 00	100 0000	0.00	0.00	414.43	77.78	492.21
169	D A/C UNIT	09/11/99	M	¥	7.0	405.00	100.0000	0.00	0.00	267 33	39.33	306.66
170	BACK UP	66/60/60	M	¥	5.0	218 00	100.0000	0.00	0.00	180.80	24.80	205.60
171	PRESSURE WAS	\$ 09/23/99	ME	¥	7.0	268 00	100.0000	0.00	0.00	374.33	55.33	429.66
172	D 4 TON A/C	01/29/99	ME	¥	7.0	1,465.00	100.0000	0.00	000	966 44	142.45	1,108 89
173	CASH REGISTER	8 07/26/99	ΜĒ	¥	5.0	260.00	100.0000	0.00	0.00	463.40	64.40	527 80
174	CASH REGISTER	3 01/28/03	징	∢ Z	5.0	464.83	100.000	0.00	0.00	000	61.98	61 98
175	SATELLITE LAPI	11/26/99	Σ	¥	5.0	2,200.00	100.000	0.00	0.00	1,100.00	440.00	1,540.00
176 .	AMD PC'S (2)	12/31/99	Σ	¥	5.0	1,725.00	100.000	0.00	000	863 00	345.00	1,208 00
.177	RESTING BENCHI	H 12/31/99	Σ	¥	5.0	643.00	100.000	00 0	000	229.76	91.82	321.58

1/15/2004

HUMANE SOCIETY OF VERO BEACH AND [_6489]

Depreciation Expense

Federal For the Period: 10/1/2002 - 9/30/2003

9:28:59AM

FY: 10/01/2002-09/30/2003

59-0863199

Sorted: (1) Tax Link (2) System Number (3) Date In Service (4) None (5) None

- Form 990, Page 2 SAFE SAFE SAFE 12/31/99 DANELATERA 2 DRWR LATERA 2 DRWR LATERA 2 DRWR LATERA 12/31/99 M HY 2 DRWR LATERA 12/31/99 M HY D WICHOSOFT NT S 12/31/99 M HY VERITAS & SEG 12/31/99 M HY VERITAS & SEG 12/31/99 M HY 1990 FORD F150 12/31/99 M HY 1990 FIRETER 1990 FORD F150 12/31/99 M HY 1990 FORD F150 12/31/99 M HY 1990 FIRETER 1990 FIR	Life Life	Other Basis 150 00 420.00 6420.00 2,678.00 3,150.00 1,602.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 6,686 00	100 0000 100 0000	Bonus 0 00 0.00 0.00	Basis Adj. 0.00	Depreciation 75.00	Depreciation 30.00	Depreciation 105.00
TC31/99 M 12/31/99 M 1		150 00 420.00 642.00 2,678.00 315.00 1,602.00 1,364.00 1,453.00 150.00 584.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686.00	100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000	0 00:0 0:00	00.00	75.00	30.00	105.00
TERA 12/31/99 M 12/31/		150 00 420.00 642.00 2,678.00 4,900.00 315.00 1,602.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 2,100 00 278,807.30 6,686 00	100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000	0 0 0 0 0 0 0 0 0	0000	75.00	30.00	105.00
12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 10/25/02 SL 10/25/02 SL 10/25/02 SL 10/25/02 SL 10/25/02 SL 10/31/02 SL 06/30/01 SL 05/31/01 SL		420.00 642.00 2,678.00 4,900.00 315.00 1,602.00 1,453.00 8,284.00 150.00 584.00 909.00 10,526.00 2,100 00 2,100 00 2,100 00 2,100 00 2,100 00 6,686.00 6,686.00	100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000	00:0 0:00	0.00		2,00	
12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 10/25/02 SL 10/25/02 SL 10/25/02 SL 10/25/02 SL 10/31/02 SL 05/31/01 SL		642.00 2,678.00 4,900.00 315.00 1,602.00 1,453.00 8,284.00 1526.00 909.00 10,526.00 2,100 00 2,100 00 2,100 00 2,100 00 2,100 00 6,686.00 6,686.00	100.0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000	0.00	000	210.00	3	294.00
12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 01/31/03 SL 10/25/02 SL 10/31/02 SL 09/30/00 SL 09/30/00 SL 09/30/01 SL 05/01/03 SL		2,678.00 4,900.00 315.00 1,602.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 6.686 00	100 0000 100 0000 100 0000 100 0000 100 0000 100 0000 100 0000		000	229.48	91 68	321.16
12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 01/31/02 SL 10/31/02 SL 10/31/02 SL 09/30/00 SL 10/31/02 SL 10/31/02 SL 09/30/01 SL 05/01/03 SL		4,900.00 315.00 1,602.00 1,364.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 6.686 00	100 0000 100 0000 100 0000 100 0000 100 0000 100 0000	0.00	00:0	1,339.20	535.60	1,874.80
12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 12/31/99 M 10/31/03 SL 10/31/02 SL 10/31/02 SL 09/30/00 SL 05/31/01 SL 05/31/01 SL 05/31/01 SL 05/31/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		315.00 1,602.00 1,364.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686 00	100.0000 100.0000 100.0000 100.0000 100.0000	000	00.0	1,750.42	699.72	2,450.14
12/31/99 M 12/31/99 M 12/31/99 M 01/31/03 SL 10/25/02 SL 10/13/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 09/30/00 05/01/03 05/01/03 05/31/01 SL 05/11/01 SL 05/11/01 SL 05/11/01 SL 05/11/01 SL 05/11/01 SL		1,602.00 1,364.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 6.686 00	100 0000 100 0000 100 0000 100 0000 100 0000	0.00	0.00	158.00	63.00	221.00
12/31/99 M 12/31/99 M 12/31/99 M 01/31/03 SL 10/25/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 09/30/00 05/01/03 05/01/03 05/31/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		1,364.00 1,453.00 8,284.00 150.00 584.00 10,526.00 2,100 00 278,807.30 5.686 00	100 0000 100 0000 100 0000 000 000	000	000	800.80	320.40	1,121.20
12/31/99 M 12/31/99 M 01/31/03 SL 10/25/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		1,453.00 8,284.00 150.00 584.00 909.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686 00	100.0000 100.0000 100.0000	000	0.00	486.84	194.78	681.62
12/31/99 M 01/31/03 SL 10/13/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		8,284.00 150.00 584.00 909.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686 00	100 0000	0.00	0.00	726 20	290.60	1,016.80
01/31/03 SL 10/25/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		150.00 584.00 909.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686 00	100 0000	000	0.00	5,178 00	2,071 00	7,249.00
10/25/02 SL 10/13/02 SL 09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL 06/13/01 SL		584.00 909.00 10,526.00 2,100 00 278,807.30 261,892.70 6.686 00	10000	000	0.00	00:00	20.00	20.00
10/13/02 SL 09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/27/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL		909.00 10,526.00 0.00 2,100 00 278,807.30 261,892.70 6.686 00	000.00	000	000	00:00	107 07	107.07
09/30/00 10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/27/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL		10,526.00 0.00 2,100 00 278,807.30 261,892.70 6.686 00	100 0000	000	00.00	0.00	181.80	181.80
10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/27/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL		0.00 2,100 00 278,807.30 261,892.70 6.686 00	100.000	0.00	0.00	0.00	0.00	0.00
10/31/02 SL 04/04/01 05/01/03 05/31/01 SL 02/27/01 SL 02/19/01 SL 06/13/01 SL 06/13/01 SL		2,100 00 278,807.30 261,892.70 6.686 00	100 0000	000	000	0.00	0.00	0.00
04/04/01 05/01/03 05/31/01 02/27/01 02/19/01 06/13/01 01/17/01 01/15/01 SL		278,807.30 261,892.70 6.686 00	100.000	0.00	000	0.00	385 00	385.00
05/01/03 05/31/01 02/27/01 02/19/01 06/13/01 01/17/01 01/15/01 01/15/01		261,892.70 6.686 00	100 0000	000	000	0.00	000	0.00
05/31/01 SL 02/27/01 SL 02/19/01 SL 06/13/01 SL 01/17/01 SL		00 989 9	100.000	0.00	00:00	0.00	000	0.00
02/27/01 SL 02/19/01 SL 06/13/01 SL 01/17/01 SL			100.000	0.00	000	893.91	99.899	1,562.51
02/19/01 SL 06/13/01 SL 01/17/01 SL F 01/15/01 SL		200 00	100.000	0.00	00.0	113.70	71.43	185.13
06/13/01 SL 01/17/01 SL 01/15/01 SL		525 00	100.000	0.00	000	121.03	75 00	196.03
01/17/01 SL 01/15/01 SL		288.00	100.000	0.00	00.0	109.32	84 00	193.32
01/15/01 SL		450 00	100.000	0.00	00:0	109.55	64 29	173.84
		00 006	100.000	0.00	000	307.73	180.00	487.73
11/30/00 SL		14,550 00	100.000	0.00	0.00	8,891.67	4,850 00	13,741.67
03/01/01 SL		170 00	100.000	0.00	0.00	53.93	34 00	87.93
03/29/01 SL	N/A 5.0	1,142 00	100.000	0.00	000	344.79	228.40	573.19
CANON GP 200 C 04/30/01 SL N		4,740 00	100.000	0.00	00:0	1,347.98	948 00	2,295.98
04/23/01 SL		544 00	100.0000	0.00	0.00	111.99	77.71	189.70
K 07/24/01 SL		7,804 00	100.0000	0.00	0.00	1,855.86	1,560.80	3,416.66
06/01/01 SL		167 00	100.0000	0.00	0.00	44.56	33 40	77.96
NEX 06/01/01 SL		223.00	100.0000	0.00	0.00	59.51	44 60	104.11
03/04/03 SL		105 00	100.0000	0.00	0.00	0.00	12.25	12.25
F 06/01/01 SL		874.00	100.0000	0.00	0.00	166.59	124.86	291.45
I 03/01/03 SL		00'669	100.0000	0.00	0.00	0.00	81.55	81.55
03/31/03 SL		512 00	100.000	0.00	0.00	0.00	51.20	51.20
05/01/03 SL		7,380.00	100.0000	0.00	0.00	0.00	439.29	439.29
05/01/03 SL		5,280.00	100.0000	0.00	0.00	0.00	314.29	314.29
09/01/03 SL		6,340.00	100 0000	00 0	0.00	0.00	75.48	75.48
12/31/99 SL	_	28,829.00	100.000	0.00	0.00	7,206.80	2,882.90	10,089.70
04/08/03 SL		419.00	100.000	0.00	0.00	000	29.93	29.93
10/11/01 SL		3,600.00	100 0000	000	0.00	700.27	720.00	1,420.27
IR 10/25/01 SL	N/A 7.0	2,140.00	100.000	0.00	000	285 61	305.71	591.32
_	V/A 5.0	1,802.00	100.000	0.00	000	273 51	360.40	633.91
04/08/03 SL 10/11/01 SL 10/25/01 SL 12/28/01 SL		3,600 2,140 1,802	3888		100.0000 100.0000 100.0000	100.0000 100.0000 100.0000 100.0000 0.00	100.0000 0.00 0.00 70 70 100.0000 0.00 0.	100.0000 0.00 0.00 1.00 1.00 1.00 1.00

1/15/200	S.ZO.DSAIVI
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HUMANE SOCIETY OF VERO BEACH AND [6489]

Depreciation Expense

FY: 10/01/2002-09/30/2003

59-0863199

Sorted: (1) Tax Link

Federal

For the Period: 10/1/2002 - 9/30/2003

119.05 787.50 112.50 1,541.88 1,764.92 529.47 3,572.17 2,291.22 75.75 103.51 14.98 20.70 35 73 16.33 28.38 73.93 39.20 126.67 11.05 15 60 5.20 70.85 28.50 53.27 49.17 4.70 71.43 2,110.83 87.29 22.03 14.29 291.67 62.92 24.28 62.32 40.47 14.81 658.58 111.62 0.0 Ending Accum Depreciation 103 51 14.98 20.70 112.50 1,541.88 1,764.92 529.47 119.05 71.43 291.67 Current Depreciation 44.00 28.57 65.29 17.00 57.14 3,572.17 2,291.22 0.00 75.75 14.29 35.73 16.33 28.38 73.93 39 20 11.05 15.60 5.20 70.85 28.50 53.27 49.17 65 04 17.94 787.50 124.70 11 43 526.00 126 67 2,110.83 0.00 18.32 11.90 22.00 3.38 5.03 5.03 54.48 0.00 0.0 0.0 000 800 0.00 0.0 Beg. Accum. Depreciation 0.0 0.00 Salvage/ Basis Adj. Sec.179/ Bonus 100 0000 100 0000 100 0000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 100.000 0000 001 100.000 000000 000000 0000001 100.000 000000 0000001 000000 100.000 100.000 100.000 100,000 100.000 100.000 100.000 100.000 000000 100.000 000.00 000.000 100.000 000.000 100,000 Bus./ Inv. % 85.00 2,630.00 1,598.00 5,463 00 1,507.00 395.00 2,000.00 42,358 00 63,536.00 1,900.00 Cost or Other Basis 220.00 200 00 457 00 80.00 899.00 1,739.00 536.00 343 00 596.00 221.00 312.00 312.00 855.00 240.00 588.00 2,834.00 13,500.00 37,005 00 120.00 400.00 171,464.00 82,484.00 30,000.00 1,515.00 1,739.00 1,109.00 18,900 00 14,964.00 6,000 00 10,500.00 5.0 10.0 5.0 10.0 100 10.0 10.0 Life 0.00 5.0 5.0 5.0 20.0 15.0 Method/ Convention ಬ ಬ ದ ದ ದ 05/02/02 05/31/02 05/01/03 08/26/02 04/08/03 09/01/03 05/12/03 05/27/03 05/26/03 05/27/03 06/06/03 06/11/03 07/29/03 08/05/03 09/01/03 05/01/03 09/01/03 09/01/03 05/06/03 09/01/03 09/15/03 50/90/90 50/06/90 50/05/90 39/01/03 07/01/03 07/18/03 35/01/03 5/01/03 35/01/03 36/15/02 36/15/02 10/18/01 39/01/03 39/01/03 39/01/03 25/02/02 05/02/02 07/01/02 35/01/03 39/01/03 35/01/03 35/01/03 Date In Service Pg 2 #1 - Form 990, Page 2 2 LG DOG CRATE NEXTEL TELEPHO GAZABO- CAST A HAND TRUCK & L REFRIG. & MICRC VERSA CAGE MO RRIGATION PUM BERIA PARK BEN SOFA, TABLE & 4 COPIER - CANON CAGE & TABLE D CAGE & TABLE D IRRIGATION PUM RRIGATION SYST 990 FORD STAT LOCKERS-VINYL OCKERS-VINYL MOTOROLA HAN DOG WALK EQUI TABLE, CHAIRS, DOG CAGES & F FREEZER - POLA 3 OFFICE CHAIR EPSON PRINTER S - STORAGE R DR MATHEWS V COMPUTERS (2)-BARK PARK DO LATERAL FILES (REFRIGERATOR DRAINAGE, PIPI COMPUTER - TE WASHER & DRY COMPUTER & S CAGES & FENCI IWO-WAY RADI COMPUTER: XE ANDSCAPING BENCHES (13) CAT CONDOS PC MONITOR POP UP TENT BENCHES (8) (2) System Number (3) Date In Service (4) None (5) None Description **PAVING** Ø System 990

HUMANE SOCIETY OF VERO BEACH AND [_6489]

FY: 10/01/2002-09/30/2003

59-0863199

Depreciation Expense Federal For the Period: 10/1/2002 - 9/30/2003

Sorted: (1) Tax Link				•	Federal						
(2) System Number (3) Date In Service (4) None (5) None				For the	le Period: 10/1/2002 - 9/30/2003	:002 - 9/30	/2003				
System S Description No.	Date In Service	Met	Method/ Convention	Life	Cost or Other Basis	Bus./ Inv. %	Sec. 179/ Bonus	Salvage/ Basis Adj.	Beg. Accum. Depreciation	Current Depreciation	Ending Accum. Depreciation
, Pg 2 #1 - Form 99		ā		0	0000	, , ,	0		o o	11	15.000
266 FENCING	_		X X	20.0	47,17200	0000 001	0.00	0.00	0.00	982.75	382 /3
267 BUILDING - ADOP	05/01/03	MSL	Σ	39.0	3,555,000 00	100 0000	0.00	0.00	0.00	34,182.69	34,182.69
268 BUILDING - RECE	09/01/03	MSL	Σ	39.0	2,042,300.00	100.0000	0.00	0.00	0.00	2,181.94	2,181.94
269 PIG YARD	09/01/03	징	Α×	15.0	1,650.00	100.0000	0.00	0.00	0.00	9.17	9.17
270 EXERCISE PATH -	. 09/01/03	ช	Ϋ́	5.0	7,000.00	100.0000	00:00	0.00	0.00	116.67	116.67
Subtotal before dispositions:				1	7,147,075.00	•	 8 0	0:00	201,997.00	78,566.13	280,563.13
Less dispositions and exchanges:					108,238.00		0.00	0.00	101,753.38		103,525.38
Net for: 990, Pg 2 #1 - Form 990, Page 2					7,038,837.00	•	0.00	0.00	100,243.62	78,566.13	177,037.75
Subtotal before dispositions:					7 147 075 00			000	201 997 00	78 566 13	280 563 13
Less dispositions and exchanges:					108,238.00		0.00	0.00	101,753.38		103,525.38
Grand total:					7,038,837.00	•	00:00	00:00	100,243.62	78,566.13	177,037.75

Form **8868** (Dècember 2000)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	\ X
=	re filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this not complete Part II unless you have already been granted an automatic 3-month extension on a pr	
Part I	Automatic 3-Month Extension of Time - Only submit onginal (no copies needed)	
	m 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I	
	corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incor- Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 10	
Type or	Name of Exempt Organization	Employer Identification number
print	HUMANE SOCIETY OF VERO BEACH AND INDIAN	
	RIVER COUNTY, FL, INC.	59-0863199
File by the due date for	Number, street, and room or suite no. If a P.O box, see instructions.	
filing your return See	POST OFFICE BOX 644 6230 77TH STREET City, town or post office, state, and ZIP code For a foreign address, see instructions.	
instructions	VERO BEACH, FL 32961-0644	
	pe of return to be filed (file a separate application for each return):	
	m 990	· -
===	m 990-BL	
	m 990-PF Form 1041-A Form 88	
box ►	. If it is for part of the group, check this box and attach a list with the names and EINs of all	······································
		. 2004
to i	ile the exempt organization return for the organization named above. The extension is for the organization calendar year or	is return for:
▶	X tax year beginning OCT 1, 2002 , and ending SEP 30, 2003	<u></u> •
2 if ti	nis tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nor	refundable credits. See instructions	\$
	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit	\$
c Ba	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with	FTD
	pon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	
	Signature and Verification	
	alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the	e best of my knowledge and belief,
it is true, c	orrect, and complete, and that I am authorized to prepare this form.	
Signature	A B. lotte Title PA	Date > / \$2c/04
	or Paperwork Reduction Act Notice, see instruction	Form 8868 (12-2000)