

Return of Organization Exempt From Income Tax

2010

Department of the Treasury
Internal Revenue Service

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.

A For the 2010 calendar year, or tax year beginning **5/01**, 2010, and ending **4/30**, 2011

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

THE PETCO FOUNDATION
9125 REHCO ROAD
SAN DIEGO, CA 92121-2270

D Employer identification number
33-0845930

E Telephone number
858-453-7845

G Gross receipts \$ **15,222,813.**

F Name and address of principal officer: **CHARLES PISCITELLO**
Same As C Above

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
If 'No,' attach a list. (see instructions)

I Tax-exempt status 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.PETCOFOUNDATION.ORG**

H(c) Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1999** **M** State of legal domicile: **CA**

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO RAISE THE QUALITY OF LIFE FOR PETS AND PEOPLE WHO LOVE AND NEED THEM.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
6 Total number of volunteers (estimate if necessary)	6	100
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	10,473,709.	14,765,909.
9 Program service revenue (Part VIII, line 2g)		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	158,044.	8,100.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-1,001.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,630,752.	14,774,009.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,627,430.	9,979,339.
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	807,004.	845,440.
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 749,529.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	861,023.	625,321.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,295,457.	11,450,100.
19 Revenue less expenses. Subtract line 18 from line 12	-1,664,705.	3,323,909.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	3,776,362.	7,593,200.
21 Total liabilities (Part X, line 26)	235,990.	728,919.
22 Net assets or fund balances. Subtract line 21 from line 20	3,540,372.	6,864,281.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **CHARLES PISCITELLO** Date: _____
Type or print name and title: **President**

Paid Preparer Use Only

Print/Type preparer's name: **Scott Trendel** Preparer's signature: *Scott Trendel* Date: **11/21/11**
Check if self-employed PTIN: **P00969573**

Firm's name: **ROSNER BROWN TOUCHSTONE & KELLER, LLP** Firm's EIN: **33-0567239**
Firm's address: **4909 MURPHY CANYON ROAD, STE. 120**
SAN DIEGO, CA 92123 Phone no.: **858-430-0300**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If 'Yes,' complete Schedule A.</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II.</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>		
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? <i>If 'Yes,' complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
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? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>		X
b 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? <i>If 'Yes,' complete Schedule D, Part VII.</i>		X
c 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? <i>If 'Yes,' complete Schedule D, Part VIII.</i>		X
d 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? <i>If 'Yes,' complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X.</i>		X
f 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 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If 'Yes,' complete Schedule F, Parts I and IV.</i>		X
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 United States? <i>If 'Yes,' complete Schedule F, Parts II and IV.</i>		X
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 United States? <i>If 'Yes,' complete Schedule F, Parts III and IV.</i>		X
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? <i>If 'Yes,' complete Schedule G, Part I (see instructions).</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
20 a Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).....		

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	X	
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? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	X	
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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.</i>		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
	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?		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
	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? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
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? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
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? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
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):		
	a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
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? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i>	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	X	
	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

BAA

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.

		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	0	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2 a	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.	0	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see Instructions)</i>		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4 a	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)?		X
b	If 'Yes,' enter the name of the foreign country: <input type="text"/> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a	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?		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the Instructions for additional information the organization must report on Schedule O.</i>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand.	13c	
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year		
1 b	Enter the number of voting members included in line 1a, above, who are independent		
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? See Schedule O	X	
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule O	X	
7 b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director or 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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?		X
10 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?		
11 a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13.	X	
12 b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12 c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. See Schedule O	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
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?		
15 a	The organization's CEO, Executive Director, or top management official		X
15 b	Other officers of key employees of the organization.		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16 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?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **See Schedule O**
- 18 Section 6104 requires an organization to make its Forms 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 Upon request
- 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 Schedule O**
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
DAVE CARR 9125 REHCO ROAD SAN DIEGO CA 92121 858-453-7845

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

Check if Schedule O contains a response to any question in this Part VII.

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

1 a 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.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. 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, and 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRUCE HALL Director	1	X					0.	0.	0.	
(2) PEGGY HILLIER Director	1	X					0.	0.	0.	
(3) REG HOLDEN Director	1	X					0.	0.	0.	
(4) MICHAEL PETERSON Director	1	X					0.	0.	0.	
(5) LANCE SCHWIMMER Director	1	X					0.	0.	0.	
(6) MAGGIE OSBURN Director	1	X					0.	0.	0.	
(7) RICH SEGAL Director	1	X					0.	0.	0.	
(8) KAILAS RAO Chairman	1	X					0.	0.	0.	
(9) ELISABETH CHARLES Director	1	X					0.	0.	0.	
(10) JUDITH MUNOZ Director	1	X					0.	0.	0.	
(11) CHARLES PISCITELLO President	10			X			0.	0.	0.	
(12) DUNCAN MATHISON Vice President	10			X			0.	0.	0.	
(13) KEVIN WHALEN Secretary	10			X			0.	0.	0.	
(14) DAVE CARR Treasurer	10			X			0.	0.	0.	
(15) PAUL JOLLY Executive Direc	32			X			0.	225,384.	2,839.	
(16)										
(17)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
(26) -----										
(27) -----										
(28) -----										
(29) -----										
1 b Sub-total							0.	225,384.	2,839.	
c Total from continuation sheets to Part VII, Section A.							0.	0.	0.	
d Total (add lines 1b and 1c)							0.	225,384.	2,839.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶ 0**

	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		X
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 individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	X	

Section B. Independent Contractors

1 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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 0**

Part VIII Statement of 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	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns.....	1 a					
	b Membership dues	1 b					
	c Fundraising events	1 c	1,189,868.				
	d Related organizations	1 d	244,623.				
	e Government grants (contributions)	1 e					
	f All other contributions, gifts, grants, and similar amounts not included above.	1 f	13,331,418.				
	g Noncash contributions included in lns 1a-1f: \$		244,623.				
	h Total. Add lines 1a-1f.		14,765,909.				
PROGRAM SERVICE REVENUE	Business Code						
	2 a -----						
	b -----						
	c -----						
	d -----						
	e -----						
	f All other program service revenue...						
	g Total. Add lines 2a-2f.						
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts).....		8,100.			8,100.	
	4 Income from investment of tax-exempt bond proceeds.						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss) ...					
		d Net rental income or (loss).....					
	7 a Gross amount from sales of assets other than inventory.	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses.					
		c Gain or (loss)					
		d Net gain or (loss).....					
	8 a Gross income from fundraising events (not including \$ 1,189,868. of contributions reported on line 1c). See Part IV, line 18	a	448,804.				
		b Less: direct expenses	b	448,804.			
		c Net income or (loss) from fundraising events.....					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory.....						
Miscellaneous Revenue		Business Code					
11 a -----							
b -----							
c -----							
d All other revenue.....							
e Total. Add lines 11a-11d.							
12 Total revenue. See instructions.			14,774,009.	0.	0.	8,100.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.....	9,979,339.	9,979,339.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.....				
4 Benefits paid to or for members.....				
5 Compensation of current officers, directors, trustees, and key employees.....	248,116.	0.	248,116.	0.
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.	0.	0.	0.
7 Other salaries and wages.....	597,324.		346,448.	250,876.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions).....				
9 Other employee benefits.....				
10 Payroll taxes.....				
11 Fees for services (non-employees):				
a Management.....				
b Legal.....	2,476.		2,476.	
c Accounting.....	22,000.		22,000.	
d Lobbying.....				
e Professional fundraising services. See Part IV, line 17.....				
f Investment management fees.....				
g Other.....	15,865.	15,865.		
12 Advertising and promotion.....				
13 Office expenses.....				
14 Information technology.....				
15 Royalties.....				
16 Occupancy.....	42,420.		42,420.	
17 Travel.....	20,073.		20,073.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.....				
19 Conferences, conventions, and meetings.....				
20 Interest.....				
21 Payments to affiliates.....				
22 Depreciation, depletion, and amortization.....				
23 Insurance.....				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.).....				
a FUNDRAISING SUPPLIES.....	467,763.			467,763.
b Postage and Shipping.....	20,927.			20,927.
c COMPUTER EXPENSE.....	12,275.		12,275.	
d Printing and Publications.....	9,963.			9,963.
e LICENSE & PERMITS.....	4,380.		4,380.	
f All other expenses.....	7,179.		7,179.	
25 Total functional expenses. Add lines 1 through 24f.....	11,450,100.	9,995,204.	705,367.	749,529.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.....				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1. Cash — non-interest-bearing		1	
	2. Savings and temporary cash investments	3,611,426.	2	6,449,780.
	3. Pledges and grants receivable, net		3	
	4. Accounts receivable, net	164,936.	4	1,143,420.
	5. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6. Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instructions)		6	
	7. Notes and loans receivable, net		7	
	8. Inventories for sale or use		8	
	9. Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11. Investments — publicly traded securities		11	
	12. Investments — other securities. See Part IV, line 11		12	
	13. Investments — program-related. See Part IV, line 11		13	
	14. Intangible assets		14	
	15. Other assets. See Part IV, line 11		15	
16. Total assets. Add lines 1 through 15 (must equal line 34)		3,776,362.	16	7,593,200.
LIABILITIES	17. Accounts payable and accrued expenses	235,990.	17	728,919.
	18. Grants payable		18	
	19. Deferred revenue		19	
	20. Tax-exempt bond liabilities		20	
	21. Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22. Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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		25	
	26. Total liabilities. Add lines 17 through 25		235,990.	26
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27. Unrestricted net assets	3,540,372.	27	6,864,281.
	28. Temporarily restricted net assets		28	
	29. Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30. Capital stock or trust principal, or current funds		30	
	31. Paid-in or capital surplus, or land, building, or equipment fund		31	
	32. Retained earnings, endowment, accumulated income, or other funds		32	
33. Total net assets or fund balances.		3,540,372.	33	6,864,281.
34. Total liabilities and net assets/fund balances.		3,776,362.	34	7,593,200.

BAA

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,774,009.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,450,100.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,323,909.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,540,372.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	6,864,281.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If 'Yes' to line 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.	X	
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 separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and 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?		X
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.		

BAA

Form 990 (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III – Functionally Integrated
 - d Type III – Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

h Provide the following information about the supported organization(s).

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants'.)	6,461,010.	7,244,649.	8,090,706.	10,473,709.	14,774,009.	47,044,083.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	6,461,010.	7,244,649.	8,090,706.	10,473,709.	14,774,009.	47,044,083.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						0.
6 Public support. Subtract line 5 from line 4.						47,044,083.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4.	6,461,010.	7,244,649.	8,090,706.	10,473,709.	14,774,009.	47,044,083.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	136,818.	122,591.	57,546.	11,983.	8,100.	337,038.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.			6,015.	8,600.		14,615.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).						0.
11 Total support. Add lines 7 through 10.						47,395,736.
12 Gross receipts from related activities, etc (see instructions).					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)).	14	99.3 %
15 Public support percentage from 2009 Schedule A, Part II, line 14.	15	98.9 %
16a 33-1/3% support test – 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input checked="" type="checkbox"/>	
b 33-1/3% support test – 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test – 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
b 10%-facts-and-circumstances test – 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 purpose						
3 Gross receipts from activities that 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 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lns 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33-1/3% support tests – 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33-1/3% support tests – 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

- ▶ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
- ▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Employer identification number

33-0845930

THE PETCO FOUNDATION

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year.....		
2 Aggregate contributions to (during year).....		
3 Aggregate grants from (during year).....		
4 Aggregate value at end of year.....		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Yes No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 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 Tax Year
a Total number of conservation easements.....	2a
b Total acreage restricted by conservation easements.....	2b
c Number of conservation easements on a certified historic structure included in (a).....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 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.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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..... ▶ \$ _____

(ii) Assets included in Form 990, Part X..... ▶ \$ _____

2 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 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1..... ▶ \$ _____

b Assets included in Form 990, Part X..... ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 0.

Part VII Investments—Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)		

Part VIII Investments—Program Related. (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets. (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15)	

Part X Other Liabilities. (See Form 990, Part X, line 25)

(a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). See Part XIV

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)		14,774,009.
2	Total expenses (Form 990, Part IX, column (A), line 25)		11,450,100.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3,323,909.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		3,323,909.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	14,774,009.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	14,774,009.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,774,009.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	11,450,100.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	11,450,100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	11,450,100.

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, line 2; 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.

Part X - FIN 48 Footnote

U.S. generally accepted accounting principles provide accounting and disclosure guidance about positions taken by an organization in its tax returns that might be uncertain. Management has considered its tax positions and believes that all of the positions taken by the Foundation in its federal and state exempt organization tax returns are more likely than not to be sustained upon examination. The Foundation's returns for the years ended May 1, 2010, May 2, 2009, and May 3, 2008, are subject to examination by federal and state taxing authorities, generally for three years

Part XIV Supplemental Information *(continued)*

Part X - FIN 48 Footnote (continued)

after they are filed.

SCHEDULE G
(Form 990 or 990-EZ)

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No. 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | | | |
|---|---|---|--|
| a | <input type="checkbox"/> Mail solicitations | e | <input type="checkbox"/> Solicitation of non-government grants |
| b | <input type="checkbox"/> Internet and email solicitations | f | <input type="checkbox"/> Solicitation of government grants |
| c | <input type="checkbox"/> Phone solicitations | g | <input type="checkbox"/> Special fundraising events |
| d | <input type="checkbox"/> In-person solicitations | | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

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

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

Part III Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GOLF TOURNAMEN (event type)	GALA (event type)	(total number)	(add column (a) through column (c))
1	Gross receipts	935,006.	703,666.		1,638,672.
2	Less: Charitable contributions	767,209.	422,659.		1,189,868.
3	Gross income (line 1 minus line 2)	167,797.	281,007.		448,804.
DIRECT EXPENSES	4	Cash prizes			
	5	Noncash prizes	51,437.	13,903.	65,340.
	6	Rent/facility costs	99,442.	129,918.	229,360.
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	16,918.	137,186.	154,104.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Combine line 3, column (d), and line 10				

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
		(add column (a) through column (c))			
1	Gross revenue				
DIRECT EXPENSES	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Combine lines 1, column (d) and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If 'No,' explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If 'Yes,' explain: _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility.....	13a	%
b An outside facility.....	13b	%

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 contact with a third party from whom the organization receives gaming revenue? Yes No

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 of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ -----

Director/officer

Employee

Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

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

2010

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number
33-0845930

Name of the organization
THE PETCO FOUNDATION

Part I. General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

Part II. 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.

Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) 2000 SPAYS & NEUTERS 863 PARK AVE NEW YORK, NY 10075	13-4127975	501 (c) (3)	12,620.	0.			GENERAL SUPPORT
(2) 4 PAWS RESCUE TEAM PO BOX 2908 MERRIFIELD, VA 22116	54-1786116	501 (c) (3)	6,867.	0.			GENERAL SUPPORT
(3) 4 PAWS SOCIETY 465 HARDY RD SULPHUR, LA 70665	26-3881654	501 (c) (3)	5,925.	170.	FMV	MERCHANDISE	GENERAL SUPPORT
(4) 9TH LIFE HAWAII PO BOX 476 MAKAWAO, HI 96768	99-0341213	501 (c) (3)	15,214.	0.			GENERAL SUPPORT
(5) A HELPING PAW INC PO BOX 387 BUZZARDS BAY, MA 02532	03-0385126	501 (c) (3)	10,000.	0.			GENERAL SUPPORT
(6) A NEW BEGINNING PET CA 4613 TINSLEY DR ORLANDO, FL 32839	59-3749154	501 (c) (3)	5,000.	12,757.	FMV	MERCHANDISE	GENERAL SUPPORT
(7) A NEW START KITTY RESC 6342 DENTON CORNERS DR CASTILE, NY 14427	27-1796856	501 (c) (3)	6,500.	0.			GENERAL SUPPORT
(8) ABBE MEMORIAL WILDLIFE 2059 SWEET VALLEY RD EL DORADO HILLS, CA 957	88-0435331	501 (c) (3)	15,000.	0.			GENERAL SUPPORT
							338

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

3 Enter total number of other organizations.....

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Schedule I (Form 990) 2010

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

ON THE APPLICATION FOR FUNDS, ORGANIZATIONS ARE REQUIRED TO INDICATE HOW THE FUNDS WILL BE UTILIZED. AS ADDITIONAL FUNDS ARE REQUESTED, ORGANIZATIONS ARE REQUIRED TO INDICATE HOW PREVIOUS FUNDS WERE UTILIZED.

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 3
Employer identification number

Name of the organization		THE PETCO FOUNDATION							
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)		(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACACIA ANIMAL HEALTH 655 W. CITRACADO PKWY ESCONDIDO, CA 92025		01-0563336	501 (c) (3)	5,710.					GENERAL SUPPORT
ACTORS & OTHERS FOR AN 11523 BURBANK BLVD N HOLLYWOOD, CA 91601		95-2783139	501 (c) (3)	45,000.	281.	FMV		MERCHANDISE	GENERAL SUPPORT
ALASKA DOG & PUPPY RES PO BOX 876888 WASILLA, AK 99687		20-0332809	501 (c) (3)	6,451.					GENERAL SUPPORT
ALL ABOUT ANIMAL RESCU 23205 GRATIOT PMB 331 EAST POINTE, MI 48021		20-3006686	501 (c) (3)	18,500.					GENERAL SUPPORT
ALLEN COUNTY SPCA 4914 S HANNA ST FORT WAYNE, IN 46806		35-6042135	501 (c) (3)	26,841.					GENERAL SUPPORT
ALLEY CAT ANGELS PO BOX 194 BATTLE CREEK, MI 49016		38-3694583	501 (c) (3)	5,368.					GENERAL SUPPORT
ALTHOL ANIMAL CONTROL 280 EXCHANGE ST ALTHOL, MA 01331		04-6001075	501 (c) (3)	6,386.	2,611.	FMV		MERCHANDISE	GENERAL SUPPORT
ALTON AREA ANIMAL AID 4530 N ALBY RD GODFREY, IL 62035		37-7604075	501 (c) (3)	5,841.	86.	FMV		MERCHANDISE	GENERAL SUPPORT
AMAZING GREYZ INC PO BOX 387 SHELDONVILLE, MA 02070		20-5921021	501 (c) (3)	7,648.					GENERAL SUPPORT
AMERICAN CANCER SOCIE 601 MONTGOMERY ST SAN FRANCISCO, CA 94111		94-1170350	501 (c) (3)	15,000.					GENERAL SUPPORT

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Schedule I Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 2 of 3
Employer identification number
33-0845930

Name of the organization		Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
THE PETCO FOUNDATION 63 IVERNESS DRIVE EAST ENGLEWOOD, CO 80112	84-04322950	501 (c) (3)	10,000.	680.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ANIMAL ALLIES PO BOX 693 MANCHESTER, NH 03105	02-0469900	501 (c) (3)	8,667.				GENERAL SUPPORT	
ANIMAL CARE & CONTROL 11 PARK PLACE NEW YORK, NY 10007	13-3788986	501 (c) (3)	5,430.				GENERAL SUPPORT	
ANIMAL FRIENDS OF THE 33751 MISSION TRAIL WILDOMAR, CA 92595	33-0276892	501 (c) (3)	5,008.	1,245.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ANIMAL FRIENDS 562 CAMP HORNE RD. PITTSBURGH, PA 15237	25-0951565	501 (c) (3)	11,951.	86.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ANIMAL GREYHOUND/GREAT PO BOX 598 HOBART, IN 46342	35-2115115	501 (c) (3)	9,250.				GENERAL SUPPORT	
ANIMAL GUARDIANS OF AM 7000 INDEPENDANCE PKWY PLANO, TX 75025	75-2804232	501 (c) (3)	6,289.	1,018.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ANIMAL HAVEN INC 251 CENTRE ST NEW YORK, NY 10013	11-6101487	501 (c) (3)	10,110.				GENERAL SUPPORT	
ANIMAL HAVEN 89 MILL RD NORTH HAVEN, CT 06473	06-0735382	501 (c) (3)	6,118.	148.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ANIMAL HOUSE 1104 W VINE DR FORT COLLINS, CO 80521	20-5415891	501 (c) (3)	6,122.				GENERAL SUPPORT	

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Schedule I Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 3 of 3

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ANIMAL KIND INC 5311 MISSION WOODS RD MISSION WOODS, KS 66205	74-3105423	501 (c) (3)	7,500.				GENERAL SUPPORT		
ANIMAL MATCH RESCUE TE PO BOX 1666 AGOURA HILLS, CA 91376	33-0970930	501 (c) (3)	8,607.				GENERAL SUPPORT		
ANIMAL PROTECTION SOCI PO BOX 13 WENTWORTH, NC 27375	86-1173269	501 (c) (3)	5,899.	947.	FMV	MERCHANDISE	GENERAL SUPPORT		
ANIMAL REFUGE CENTER PO BOX 6642 FORT MEYERS, FL 33911	65-0057419	501 (c) (3)	8,572.	299.			GENERAL SUPPORT		
ANIMAL RESCUE INC 2 HERITAGE FARM DR NEW FREEDOM, PA 17349	23-2180310	501 (c) (3)	5,020.				GENERAL SUPPORT		
ANIMAL RESCUE LEAGUE O 6620 HAMILTON AVENUE PITTSBURG, PA 15206	25-0325750	501 (c) (3)	11,814.	3,997.	FMV	MERCHANDISE	GENERAL SUPPORT		
ANIMAL RESCUE MERRIMAC PO BOX 8006 WARD HILL, MA 01835	20-4733381	501 (c) (3)	5,197.	112.	FMV	MERCHANDISE	GENERAL SUPPORT		
ANIMAL RESCUE NEW ORLE 1219 COLISEUM ST NEW ORLEANS, LA 70130	51-0569173	501 (c) (3)	4,894.	766.	FMV	MERCHANDISE	GENERAL SUPPORT		
ANIMAL RESOURCE FOUNDA OF IOWA INC PALO, IA 52324	94-3471348	501 (c) (3)	17,500.				GENERAL SUPPORT		
ANIMAL SHELTER, INC 17 LAURELWOOD RT STERLING, MA 01564	04-3236868	501 (c) (3)	7,500.				GENERAL SUPPORT		

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Schedule I Cent (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 4 of 3

Employer identification number

33-0845930

Name of the organization
THE PETCO FOUNDATION

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL WELFARE FEDERAT 42 DEEP RIVER RD SANFORD, NC 27332	22-3378806	501 (c) (3)	6,000.				GENERAL SUPPORT
ANUELLE CAYS RESCUE 570 FORT WASHINGTON AVE NEW YORK, NY 10033	26-0129778	501 (c) (3)	6,970.				GENERAL SUPPORT
ANMAL RSCUE LG OF BOST 10 CHANDLER ST BOSTON, MA 02116	04-2103714	501 (c) (3)	80,241.	1,425.	FMV	MERCHANDIS E	GENERAL SUPPORT
ARIZONA ANIMAL WELFARE 30NORTH 40TH PL PHOENIX, AZ 85034	23-7149445	501 (c) (3)	21,726.	455.	FMV	MERCHANDIS E	GENERAL SUPPORT
ARIZONA SOCIETY FOR TH 18611 N 22ND ST LOT 44 PHOENIX, AZ 85024	86-1044004	501 (c) (3)	7,569.	122.	FMV	MERCHANDIS E	GENERAL SUPPORT
ARK OF CLEVELAND PO BOX 1514 CLEVELAND, TN 37364	62-1823326	501 (c) (3)	8,625.	625.	FMV	MERCHANDIS E	GENERAL SUPPORT
ARK-VALLEY HUMANE SOCI PO BOX 1335 BUENA VISTA, CO 81211	84-1161648	501 (c) (3)	17,500.				GENERAL SUPPORT
ASSISI ANIMAL FOUNDATI PO BOX 143 CRYSTAL LAKE, IL 60012	36-3224013	501 (c) (3)	7,627.	74.			GENERAL SUPPORT
AURORA ANIMAL SHELTER 15750 E 32ND AVE AURORA, CO 80011	84-6000564	501 (c) (3)	10,998.	80.	FMV	MERCHANDIS E	GENERAL SUPPORT
AUSTIN PETS ALIVE PO BOX 6247 AUSTIN, TX 78762	74-2893360	501 (c) (3)	49,297.	694.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Schedule I (Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 5 of 3

Name of the organization		Employer identification number		Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	33-0845930		
B.A.R.C. PO BOX 735 BIG BEAR CITY, CA 92314	93-1201887	501 (c) (3)	12,560.				GENERAL SUPPORT			
BANNOCK HUMANE SOCIETY PO BOX 332 POCAHELLO, ID 83204	23-7201842	501 (c) (3)	20,007.				GENERAL SUPPORT			
BEAGLES TO THE RESCUE 1847 CENTERVILLE TRPK S CHESAPEAKE, VA 23322	71-1044389	501 (c) (3)	5,432.				GENERAL SUPPORT			
BEREA ANIMAL RESCUE FU PO BOX 544 BEREA, OH 44107	34-1621423	501 (c) (3)	8,408.	229.	FMV	MERCHANDISE	GENERAL SUPPORT			
BEST FRIEND ANIMAL SAN 5001 ANGEL CANYON RD KANAB, UT 84741	23-7147797	501 (c) (3)	37,500.	53.	FMV	MERCHANDISE	GENERAL SUPPORT			
BEVERLY ANIMAL SHELTER PO BOX 424 WATERLOO, NY 13165	16-1472747	501 (c) (3)	26,228.	37.	FMV	MERCHANDISE	GENERAL SUPPORT			
BIKER BILLS TIGGER LAN 5192 OUTLOOK DR MELBOURNE, FL 32940	26-4586244	501 (c) (3)	6,525.	2,497.	FMV	MERCHANDISE	GENERAL SUPPORT			
BLESS THE BEASTS OF HU 378 WILDWOOD AVE RIO DELL, CA 95562	68-0417175	501 (c) (3)	1,275.	6,096.	FMV	MERCHANDISE	GENERAL SUPPORT			
BOXER RESCUE INC PO BOX 440 GRAFTON, MA 01519	27-1946611	501 (c) (3)	6,095.	15.	FMV	MERCHANDISE	GENERAL SUPPORT			
BRAVEHEART RESCUE INC 12745 E 190TH ST HASTINGS, MN 55033	26-2826351	501 (c) (3)	30,000.				GENERAL SUPPORT			

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Schedule I Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROOKHAVEN ANIMAL RESC 3114 STIPP AVE MEDFORD, NY 11763	26-4037050	501 (c) (3)	16,984.				GENERAL SUPPORT
BUTLER COUNTY HUMANE S 1015 EVANS CITY RD RENFREW, PA 16053	23-7110434	501 (c) (3)	6,000.				GENERAL SUPPORT
CACHE CREEK ANIMAL RES 1235 SPANISH BLUFF ANNA, IL 62906	27-1010451	501 (c) (3)	7,908.	721.	FMV	MERCHANDIS E	GENERAL SUPPORT
CALUMET SNAP PO BOX 235 HAMMOND, IN 46325	26-4602592	501 (c) (3)	25,000.	227.	FMV	MERCHANDI SE	GENERAL SUPPORT
CAT ADOPTION TEAM SERV 6 GLENN AVE RIVERSIDE, RI 02915	13-4347466	501 (c) (3)	18,931.				GENERAL SUPPORT
CAT ADOPTION TEAM 14175 SW GALBREATH DR SHERWOOD, OR 97140	20-0773189	501 (c) (3)	6,071.				GENERAL SUPPORT
CAT HOUSE ON THE KINGS 7120 S KINGS RIVER RD PARLIER, CA 93648	27-0015288	501 (c) (3)	5,535.	691.	FMV	MERCHANDIS E	GENERAL SUPPORT
CAT SPAY NEUTER CONNEC PO BOX 27927 OMAHA, NE 68127	47-3207415	501 (c) (3)	6,500.				GENERAL SUPPORT
CAT UTOPIA PO BOX 1088 PENDLETON, OR 97801	26-3897812	501 (c) (3)	6,360.				GENERAL SUPPORT
CATERING TO CATS & DOG PO BOX 123 CORNELIUS, NC 28031	26-4298314	501 (c) (3)	12,319.				GENERAL SUPPORT

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Name of the organization		Employer identification number		Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE PETCO FOUNDATION		33-0845930								
CATS FOR LIFE INC 12723 STILLINGTON DR HOUSTON, TX 77015	26-2538970	501 (c) (3)	7,957.				GENERAL SUPPORT			
CATS GALORE 54738 DAY RD MILTON FREETWATE, OR 97862	41-2115096	501 (c) (3)	21,500.				GENERAL SUPPORT			
CATS IN NEED OF HUMANE 12188 CENTRAL AVE CHINO, CA 91710	95-4302262	501 (c) (3)	4,918.	792. FMV		MERCHANDISE	GENERAL SUPPORT			
CATAILZ ORG 1812 WINDHAVEN CT WEATHERFORD, TX 76087	61-1577801	501 (c) (3)	6,042.				GENERAL SUPPORT			
CAUSE FOR PAWS INC PO BOX 1391 HUTCHINSON, KS 67504	20-5240367	501 (c) (3)	11,281.				GENERAL SUPPORT			
CAUSE FOR PAWS PO BOX 130472 ROSEVILLE, MN 55113	41-1906320	501 (c) (3)	8,333.				GENERAL SUPPORT			
CEDER RAPIDS ANIMALS PO BOX 11195 CEDER RAPIDS, IA 52410	26-3773638	501 (c) (3)	11,298.	582. FMV		MERCHANDISE	GENERAL SUPPORT			
CEN-TEX HUMANE SOCIETY 5501 S CLEAR CREEK RD KILLEN, TX 76549	23-7076703	501 (c) (3)	4,856.	265. FMV		MERCHANDISE	GENERAL SUPPORT			
CENTRAL FLORIDA PUG RE PO BOX 953744 LAKE MARY, FL 32795	20-5088409	501 (c) (3)	6,502.				GENERAL SUPPORT			
CENTRAL VALLEY COALITI 619 WOODWORTH AVE 2ND FLO CLOVIS, CA 93612	30-0019352	501 (c) (3)	20,000.				GENERAL SUPPORT			

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Employer identification number
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Name of the organization		Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
THE PETCO FOUNDATION								
CHAMPS IN CHUBBOCK INC PO BOX 5343 CHUBBUCK, ID 83202	26-3681254	501 (c) (3)	7,621.				GENERAL SUPPORT	
CHARLESTON ANIMAL SOCI 2455 REMOUNT RD NORTH CHARLESTO, SC 29406	57-6021863	501 (c) (3)	6,554.	52.	FMV	MERCHANDISE	GENERAL SUPPORT	
CHICAGO CANINE RESCUE 2227 W BELMONT AVE CHICAGO, IL 60657	83-0217643	501 (c) (3)	13,085.				GENERAL SUPPORT	
CHIHUAHUA & SMALL DOG 53 MONK ST COLORADO SPRING, CO 80911	36-4483373	501 (c) (3)	7,423.				GENERAL SUPPORT	
CITY CRITTERS PO BOX 1345 CANAL ST STAT NEW YORK, NY 10013	26-3457337	501 (c) (3)	25,440.				GENERAL SUPPORT	
CITY OF ALBUQUERQUE AN 8920 LOMAS BLVD NE ALBUQUERQUE, NM 87112	85-6000102	501 (c) (3)	30,924.				GENERAL SUPPORT	
CITY OF FARMINGTON 901 FAIRGROUNDS RD FARMINGTON, NM 87401	85-6000129	501 (c) (3)	5,240.				GENERAL SUPPORT	
CITY OF HOLLISTER PO BOX 638 HOLLISTER, MO 65673	43-1023289	501 (c) (3)	5,250.				GENERAL SUPPORT	
CITY OF MEMPHIS ANIMAL 3456 TCHULAHOMA RD MEMPHIS, TN 38118	62-6000361	501 (c) (3)	10,000.				GENERAL SUPPORT	
CITY OF SAN ANTONIO AN 4710 HWY 151 SAN ANTONIO, TX 78227	74-6002070	501 (c) (3)	58,696.				GENERAL SUPPORT	

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND ANIMAL PROTE 1729 WILLEY AVE CLEVELAND, OH 44113	34-0714644	501 (c) (3)	10,621.	827.	FMV	MERCHANDIS E	GENERAL SUPPORT
COALITION FOR PETS & P 8581 SANTA MONICA BLVD WEST HOLLYWOOD, CA 90069	95-4755210	501 (c) (3)	59,500.				GENERAL SUPPORT
COALITN FOR ANMAL RESC PO BOX 2203 HILLSBORO, MO 63050	02-0727541	501 (c) (3)	6,237.	69.	FMV	MERCHANDIS E	GENERAL SUPPORT
COCHECO VALLEY HUMANE 262 COUNTY FARM RD DOVER, NH 03820	22-2561784	501 (c) (3)	6,285.	359.	FMV	MERCHANDIS E	GENERAL SUPPORT
COINS FOR CRITTERS PO BOX 2466 MUSKOGEE, OK 74402	73-1600003	501 (c) (3)	8,643.	19.	FMV	MERCHANDIS E	GENERAL SUPPORT
COLUMBIA SECOND CHANCE PO BOX 10186 COLUMBIA, MO 65205	43-1852167	501 (c) (3)	5,263.	27.	FMV	MERCHANDIS E	GENERAL SUPPORT
COMMUNITY CONCERNS FOR PO BOX 3795 WALNUT CREEK, CA 94598	94-3037122	501 (c) (3)	21,039.				GENERAL SUPPORT
COMPANIONS FOR LIFE PO BOX 794073 DALLAS, TX 75379	20-3864293	501 (c) (3)	5,500.				GENERAL SUPPORT
CONNECTICUT GRYNHD ADO PO BOX 900 AVON, CT 06001	20-2307522	501 (c) (3)	12,453.				GENERAL SUPPORT
DISCOVERY PET ONLINE PO BOX 79609 BALTIMORE, MD 21279	06-1792887	501 (c) (3)	101,293.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II. Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIXIE SPAY NEUTER EXPR PO BOX 5629 CLEVELAND, TN 37320	26-2203324	501 (c) (3)	10,319.				GENERAL SUPPORT
DOUGLAS ANIMAL WELFARE PO BOX 1850 GARDNERVILLE, NV 89410	30-0028975	501 (c) (3)	16,445.				GENERAL SUPPORT
EASEL ANIMAL RESCUE IE PO BOX 7825 EWING, NJ 08628	80-0155306	501 (c) (3)	12,000.	485.	FMV	MERCHANDIS E	GENERAL SUPPORT
EASTSHORE HUMANE ASSOC 1100 PARK ST CHILTON, WI 53014	39-1565423	501 (c) (3)	4,524.	604.			GENERAL SUPPORT
ELLEN GIFFORD SHELTER 30 UNDISP RD BRIGHTON, MA 02135	04-2239741	501 (c) (3)	7,124.	97.	FMV	MERCHANDIS E	GENERAL SUPPORT
ELMBROK HUMANE SOCIETY 20950 ENTERPRISE AVE BROOKFIELD, WI 53045	39-6091712	501 (c) (3)	4,664.	1,439.	FMV	MERCHANDIS E	GENERAL SUPPORT
ERIE COUNTY SPCA 205 ENSMINGER RD TONAWANDA, NY 14150	16-0425315	501 (c) (3)	20,472.	186.	FMV	MERCHANDIS E	GENERAL SUPPORT
ESCONDIDO HUMANE SOCIE 3450 E VALLEY PKWY ESCONDIDO, CA 92027	95-1661662	501 (c) (3)	80,926.	679.	FMV	MERCHANDIS E	GENERAL SUPPORT
FAITHFUL FRIENDS INC 3 GERMANY DR STE 4 WILMINGTON, DE 19804	51-0410508	501 (c) (3)	6,179.	2,407.	FMV	MERCHANDIS E	GENERAL SUPPORT
FAMILY VIOLENCE PREVEN 7911 BROADWAY ST SAN ANTONIO, TX 78209	74-1994151	501 (c) (3)	15,000.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAST FRIENDS 93 MONADNOCK HWY SWANZEY, NH 03431	02-0460134	501 (c) (3)	9,976.				GENERAL SUPPORT
FELINE FRIENDZ IN NEBR PO BOX 641818 OMAHA, NE 68164	20-0085334	501 (c) (3)	7,122.				GENERAL SUPPORT
FELINE RESCUE & REHOME PO BOX 250567 LITTLE ROCK, AR 72225	68-0541727	501 (c) (3)	25,000.				GENERAL SUPPORT
FELINE RESCUE ASSOCIAT PO BOX 396 STEVENSON, MD 21153	26-0427900	501 (c) (3)	13,144.	96.	FMV	MERCHANDIS E	GENERAL SUPPORT
FIDELCO GUIDE DOG FOUNDATION BLOOMFIELD, CT 06002	06-6060478	501 (c) (3)	15,927.				GENERAL SUPPORT
FIELD HAVEN FELINE RES 2754 IRONWOOD LANE LINCOLN, CA 95648	30-0240425	501 (c) (3)	15,692.	469.	FMV	MERCHANDIS E	GENERAL SUPPORT
FLATHEAD SPAY & NEUTER PO BOX 2095 WHITEFISH, MT 59937	81-0539954	501 (c) (3)	7,505.	43.	FMV	MERCHANDIS E	GENERAL SUPPORT
FOOTHILLS ANIMAL RESCU PO BOX 4865 CAVE CREEK, AZ 85327	86-0789269	501 (c) (3)	10,621.	407.	FMV	MERCHANDIS E	GENERAL SUPPORT
FOREVER HOME RESCUE NE 32 JORIE LANE WALPOLE, MA 02081	26-2077869	501 (c) (3)	5,000.	628.	FMV	MERCHANDIS E	GENERAL SUPPORT
FORT COLLINS CAT RESCU 2321 E MULBERRY ST FORT COLLINS, CO 80524	20-4959731	501 (c) (3)	5,255.	427.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Name of the organization
 THE PETCO FOUNDATION
 Employer identification number
 33-0845930

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOSTER PARROTS LTD 35 VERNON ST ROCKLAND, MA 02370	04-3458267	501(c)(3)	21,500.				GENERAL SUPPORT
FOUND, FOR THE CARE OF PO BOX 2574 SPRING VALLEY, CA 91979	33-0127364	501(c)(3)	10,464.	6.	FMV	MERCHANDISE	GENERAL SUPPORT
FOX VALLEY HUMANE SOCI N115 TWO MILE RD APPLETON, WI 54914	39-0992559	501(c)(3)	5,352.	248.			GENERAL SUPPORT
FREEDOM GUIDE DOGS FOR 1210 HARDCRABBLE RD CASSVILLE, NY 13318	22-3136677	501(c)(3)	14,479.				GENERAL SUPPORT
FRESH START ANIMAL RES 1237 LOGAN AVE BELVIDERE, IL 61008	71-1002989	501(c)(3)	5,664.	1,487.	FMV	MERCHANDISE	GENERAL SUPPORT
FRIENDLY & FERREL CAT PO BOX 8602 ROLLING MEADOWS, IL 60008	30-0542271	501(c)(3)	11,446.	1,765.	FMV	MERCHANDISE	GENERAL SUPPORT
FRIENDS IN NEED 5194 NORTH LAKE MOUNTAIN EAGLE MOUNTAIN, UT 84043	75-3046831	501(c)(3)	7,495.	146.	FMV	MERCHANDISE	GENERAL SUPPORT
FRIENDS OF ANIMALS UTA PO BOX 682155 PARK CITY, UT 84068	87-0482464	501(c)(3)	12,863.	277.	FMV	MERCHANDISE	GENERAL SUPPORT
FRIENDS OF FELINES INC PO BOX 325 PORT REPUBLIC, MD 20676	47-0936359	501(c)(3)	7,231.				GENERAL SUPPORT
FRIENDS OF HOMELESS AN PO BOX 143 HAWTHORNE, NJ 07507	20-4589841	501(c)(3)	15,956.	659.	FMV	MERCHANDISE	GENERAL SUPPORT

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Name of the organization		Employer identification number		Part II. Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization of government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	33-0845930		
FRIENDS OF PLYMTH FND PO BOX 578 MANOMET, MA 02345	04-3060594	501 (c) (3)	14,113.	551.	FMV	MERCHANDIS E	GENERAL SUPPORT			
FRIENDS OF THE PALM SP 4810 CAMINO PARACELA PALM SPRINGS, CA 92264	33-0731853	501 (c) (3)	10,000.				GENERAL SUPPORT			
FUREVER FRIENDS ANIMAL NETWORK OLD FORT, NC 28762	91-2193306	501 (c) (3)	9,579.				GENERAL SUPPORT			
FURRY KIDS REFUGE PO BOX 1442 LEES SUMMIT, MO 64063	38-3724183	501 (c) (3)	4,595.	406.	FMV	MERCHANDIS E	GENERAL SUPPORT			
GERMAN SHEPHERD RESCUE PO BOX 194 WILDWOOD, FL 34785	26-1566541	501 (c) (3)	5,327.				GENERAL SUPPORT			
GIVE ME SHELTER CAT RE PO BOX 411013 SAN FRANCISCO, CA 94141	20-1685522	501 (c) (3)	6,014.	3,584.	FMV	MERCHANDIS E	GENERAL SUPPORT			
GLEN COVE ANML LOVERS 40 SHORE RD GLEN COVE, NY 11542	11-3259425	501 (c) (3)	2,095.	3,463.	FMV	MERCHANDIS E	GENERAL SUPPORT			
GOLDEN BEGINNINGS GOLD PO BOX 19848 HOUSTON, TX 77224	76-0605942	501 (c) (3)	8,325.				GENERAL SUPPORT			
GREYFOOT CAT RESCUE PO BOX 310 VENTURA, CA 93002	77-0501124	501 (c) (3)	8,533.	56.	FMV	MERCHANDIS E	GENERAL SUPPORT			
GREYHOUND ADOPTION CEN PO BOX 2433 LA MESA, CA 91943	95-4132021	501 (c) (3)	5,633.				GENERAL SUPPORT			

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREYHOUND ADOPTION TX PO BOX 680 ADDISON, TX 75001	75-2930618	501 (c) (3)	5,879.				GENERAL SUPPORT
GREYHOUND FRIENDS INC 167 SADDLE HILL RD HOPKINGTON, MA 01748	22-2624136	501 (c) (3)	14,265.				GENERAL SUPPORT
GREYHOUND PETS OF AM PO BOX 1495 MIDDLEBORO, MA 02346	04-2969202	501 (c) (3)	9,966.	52.	FMV	MERCHANDISE	GENERAL SUPPORT
GREYHOUND PETS OF AMER P O BOX 778 CONCORD, NH 03302	02-0424800	501 (c) (3)	8,467.				GENERAL SUPPORT
GREYHOUND RESCUE/REHAB PO BOX 572 CROSS RIVER, NY 10518	13-4123718	501 (c) (3)	8,294.				GENERAL SUPPORT
GRTER ANDRO HUMANE SOC VERTERINARY HOSPITAL, INC. ANNAPOLIS, MD 21401	01-6011843	501 (c) (3)	6,958.	785.	FMV	MERCHANDISE	GENERAL SUPPORT
GRTER NEW HAVEN CAT PR PO BOX 1432 NEW HAVEN, CT 06506	06-1463271	501 (c) (3)	10,000.	612.	FMV	MERCHANDISE	GENERAL SUPPORT
GUARDIANS FOR ANIMALS 6353 CANMOOR DR TROY, MI 48098	20-0823234	501 (c) (3)	15,438.	928.	FMV	MERCHANDISE	GENERAL SUPPORT
GUIDE DOG END FOR THE 371 E JERICHO TURNPIKE SMITHTOWN, NY 11787	11-1687477	501 (c) (3)	195,462.				GENERAL SUPPORT
GUIDE DOGS FOR THE BLI 350 LOS RANCHITOS RD SAN RAFAEL, CA 94903	94-1196195	501 (c) (3)	195,462.				GENERAL SUPPORT

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Name of the organization		Employer identification number		Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE PETCO FOUNDATION								33-0845930		
GUIDE DOGS OF TEXAS 1503 ALLENE DR SAN ANTONIO, TX 78213	74-2530268	501 (c) (3)	195,462.				GENERAL SUPPORT			
GUIDE DOGS OF THE DESE PO BOX 1692 PALM SPRINGS, CA 92263	23-7296531	501 (c) (3)	205,863.				GENERAL SUPPORT			
GUIDING EYES FOR THE B 361EN ROUTE PATTERSON, NY 12563	13-1854606	501 (c) (3)	14,479.				GENERAL SUPPORT			
HALIFAX HUMANE SOCIETY 2364 E LPGA BLVD DAYTONA BEACH, FL 32124	59-0530990	501 (c) (3)	9,000.				GENERAL SUPPORT			
HAPPY TAILS PET SANCTU 6001 FOLSOM BLVD SACRAMENTO, CA 95819	68-0317260	501 (c) (3)	10,000.				GENERAL SUPPORT			
HARLEYS HOPE INC PO BOX 2098 HARRISON, AR 72602	26-2852052	501 (c) (3)	5,393.				GENERAL SUPPORT			
HAWAIIAN HUMANE SOCIET 2700 WAIALAE AVE HONOLULU, HI 96826	99-0073490	501 (c) (3)	4,263.	789. FMV		MERCHANDISE	GENERAL SUPPORT			
HEART AND SOUL 169 COMMACK RD COMMACK, NY 11725	11-3511099	501 (c) (3)	10,087.	1,037. FMV		MERCHANDISE	GENERAL SUPPORT			
HEART OF CHULA VISTA PO BOX 821 CHULA VISTA, CA 91912	37-1522742	501 (c) (3)	25,603.				GENERAL SUPPORT			
HEAVEN CAN WAIT ANIMAL 511 SEMINOLE MUSKEGON, MI 49444	26-1869768	501 (c) (3)	5,043.	124. FMV		MERCHANDISE	GENERAL SUPPORT			

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Name of the organization: THE PETCO FOUNDATION Employer identification number: 33-0845930							
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
HEAVENLY PAWS ANIMAL S 3678 ALDINGER RD SEVEN VALLEYS, PA 17360	87-9728506	501 (c) (3)	9,011.				GENERAL SUPPORT
HELLO BULLY 4885 A MCKNIGHT RD PITTSBURGH, PA 15237	26-0447525	501 (c) (3)	7,031.	639.	FMV	MERCHANDIS E	GENERAL SUPPORT
HELOTES HUMANE SOCIETY PO BOX 908 HELOTES, TX 78023	26-2134193	501 (c) (3)	3,528.	1,592.	FMV	MERCHANDIS E	GENERAL SUPPORT
HELPING HANDS FOR ANIM 17825 111TH AVE SE RENTON, WA 98055	94-3168113	501 (c) (3)	4,070.	3,353.	FMV	MERCHANDIS E	GENERAL SUPPORT
HELPING OUT PETS EVERY PO BOX 2005 UPLAND, CA 91785	71-0949539	501 (c) (3)	5,164.	160.	FMV	MERCHANDIS E	GENERAL SUPPORT
HERMITAGE NO-KILL CAT 5278 E 21ST ST TUCSON, AZ 85711	86-0213263	501 (c) (3)	10,235.	104.	FMV	MERCHANDIS E	GENERAL SUPPORT
HOPE ANIMAL RESCUE 3701 CORONADO DR ALTON, IL 62002	20-4809712	501 (c) (3)	6,378.	143.	FMV	MERCHANDIS E	GENERAL SUPPORT
HOPE PO BOX 273331 HOUSTON, TX 77277	76-0618317	501 (c) (3)	7,308.	6.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUDSON VALLEY HUMANE S 200 QUAKER RD POMONA, NY 10970	10-970	501 (c) (3)	3,910.	2,613.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMAN ANIMAL BOND RESE 1155 FIFTEENTH ST NW WASHINGTON, DC 20005	27-4159453	501 (c) (3)	66,000.				GENERAL SUPPORT

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Employer identification number
33-0845930

Name of the organization		(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE PETCO FOUNDATION								
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
HUMAN SOCIETY OF PIKES 1100 NE 192ND AVE VANCOUVER, WA 98684	91-0759124	501 (c) (3)	10,000.				GENERAL SUPPORT	
HUMANE SOC OF CENT NY PO BOX 38 LIVERPOOL, NY 13088	16-6069942	501 (c) (3)	10,000.				GENERAL SUPPORT	
HUMANE SOC OF THE DUNE PO BOX 2481 CHESTERTON, IN 46304	20-1015057	501 (c) (3)	15,000.				GENERAL SUPPORT	
HUMANE SOC SOUTHEAST MO 2536 BOUTIN DR CAPE GIRARDEAU, MO 63701	43-1108057	501 (c) (3)	4,752.	393.	FMV	MERCHANDISE	GENERAL SUPPORT	
HUMANE SOCIETY OF BROW 2070 GRIFFIN RD FORT LAUDERDALE, FL 33312	59-6002321	501 (c) (3)	97,760.	166.	FMV	MERCHANDISE	GENERAL SUPPORT	
HUMANE SOCIETY OF GREA 5445 PARALLEL PARKWAY KANSAS CITY, KS 66104	48-0581951	501 (c) (3)	25,100.				GENERAL SUPPORT	
HUMANE SOCIETY OF HARR 7790 GRAYSON RD HARRISBURG, PA 17111	23-1365361	501 (c) (3)	13,553.				GENERAL SUPPORT	
HUMANE SOCIETY OF HIGH 7321 HAWOOD TAYLOR BLVD SEBRING, FL 33876	59-1104159	501 (c) (3)	6,928.	157.	FMV	MERCHANDISE	GENERAL SUPPORT	
HUMANE SOCIETY OF IMPE 1575 W PICO RD EL CENTRO, CA 92243	23-7108184		6,222.	341.	FMV	MERCHANDISE	GENERAL SUPPORT	
HUMANE SOCIETY OF KENT 3077 WILSON DR GRAND RAPIDS, MI 49534	38-1360926	501 (c) (3)	12,518.	564.	FMV	MERCHANDISE	GENERAL SUPPORT	

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF PUTN PO BOX 995 COCKEVILLE, TN 38503	58-1387894	501 (c) (3)	10,504.				GENERAL SUPPORT
HUMANE SOCIETY OF SOME PO BOX 182 SOMERSET, PA 15501	25-1258608	501 (c) (3)	5,715.	103.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMANE SOCIETY OF SOMO PO BOX 1296 SANTA ROSA, CA 95402	94-6001315	501 (c) (3)	10,000.				GENERAL SUPPORT
HUMANE SOCIETY OF ST L PO BOX 3661 FORT PIERCE, FL 34948	59-0836088	501 (c) (3)	2,727.	4,421.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMANE SOCIETY OF THE 2129 W CHENANGO AVE LITTLETON, CO 80120	27-0911048	501 (c) (3)	9,332.	39.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMANE SOCIETY OF UTAH PO BOX 573559 MURRAY, UT 84157	87-0256350	501 (c) (3)	5,055.	259.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMANE SOCIETY OF WAYN 1475 COUNTY HORSE RD LYONS, NY 14489	22-2541964	501 (c) (3)	7,206.				GENERAL SUPPORT
HUMANE SOCIETY SILICON 901 AMES AVE MILPITAS, CA 95035	94-1196215	501 (c) (3)	62,379.	527.	FMV	MERCHANDIS E	GENERAL SUPPORT
HUMANE SOCIETY YOUTH 67 NORWICH-ESSEX IPKE EAST HADDAM, CT 06423	53-0225390	501 (c) (3)	20,000.				GENERAL SUPPORT
JOEYS FELINE FRIENDS 47 591 HALEMANU ST HANEHOE, HI 96744	99-0339218	501 (c) (3)	7,748.	114.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
K9 RESCUE & REHAB PO BOX 771316 ST LOUIS, MO 63177	27-1664749	501 (c) (3)	5,792.	339.	FMV	MERCHANDIS E	GENERAL SUPPORT
KANSAS HUMANE SOCIETY 3313 N HILLSIDE WICHITA, KS 67219	48-0554339	501 (c) (3)	29,000.				GENERAL SUPPORT
KAT CONNECTION CORP PO BOX 557 EAST MEADOW, NY 11554	75-3161470	501 (c) (3)	12,937.	529.	FMV	MERCHANDIS E	GENERAL SUPPORT
KENT PARKS FOUNDATION PO BOX 26 KENT, WA 98035	80-0064905	501 (c) (3)	10,252.				GENERAL SUPPORT
KENTUCKIANA PUG RESCUE PO BOX 22697 LOUISVILLE, KY 40252	35-2129894	501 (c) (3)	6,151.	196.	FMV	MERCHANDIS E	GENERAL SUPPORT
KINDRED KITTIES 614 59TH STREET KENOSHA, WI 53140	39-2014019	501 (c) (3)	5,121.				GENERAL SUPPORT
KITTEN CRAZY INC 2346 FAWN HAVEN DR MEDINA, OH 44256	43-2062299	501 (c) (3)	30,187.				GENERAL SUPPORT
KITTICO CAT RESCUE PO BOX 600447 DALLAS, TX 75360	75-2755493	501 (c) (3)	4,899.	595.	FMV	MERCHANDIS E	GENERAL SUPPORT
KITTY ANGEL TEAM ADOPT PO BOX 151 FOSTER, OR 97345	48-1266537	501 (c) (3)	21,417.				GENERAL SUPPORT
KITTY CONNECTION INC 6 CUDWORTH ST MEDFORD, MA 02155	20-5563359	501 (c) (3)	5,606.	451.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KITTY KINDL INC PO BOX 961 NEW YORK, NY 10156	31-1717255	501 (c) (3)	10,609.				GENERAL SUPPORT
KW CAGES KEVIN WHALEY 9565 PATHWAY STREET STE B SANTEE, CA 92071	33-0418707	501 (c) (3)	7,055.				GENERAL SUPPORT
LAKE AREA PARTNERSHIPS PO BOX 4964 LAKE CHARLES, LA 70606	20-0541582	501 (c) (3)	12,750.				GENERAL SUPPORT
LAST HOPE ANIMAL RESCU PO BOX 61 SYOSSET, NY 11791	11-2618189	501 (c) (3)	6,332.				GENERAL SUPPORT
LEADER DOGS FOR THE BL 1039 S ROCHESTER RD ROCHESTER, MI 48307	38-1366931	501 (c) (3)	14,479.				GENERAL SUPPORT
LI KITTIES INC PO BOX 754 SPEONK, NY 11972	11-3842857	501 (c) (3)	32,999.				GENERAL SUPPORT
LIFELINE FOR PETS INC PO BOX 1373 MONROVIA, CA 91076	95-3786746	501 (c) (3)	5,426.	220.	FMV	MERCHANDISE	GENERAL SUPPORT
LILYS LOVE FOUNDATION 21825 PLEASANT ST ST CLAIR SHORES, MI 48080	20-8222433	501 (c) (3)	10,000.				GENERAL SUPPORT
LINDA'S ANIMAL RESCUE 801 CLAREMONT RD CHARLOTTE, NC 28214	56-2091602	501 (c) (3)	5,637.				GENERAL SUPPORT
LINDAS MAGNIF MUTTS RE 755 N WOLF RD HILLSIDE, IL 60162	20-2516008	501 (c) (3)	32,025.	41.	FMV	MERCHANDISE	GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PEICO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITTLE SHELTER ANML AD 33 WARNER RD HUNTINGTON, NY 11743	11-6000821	501 (c) (3)	25,790.				GENERAL SUPPORT
LOAVES & FISHES PO BOX 2161 SACRAMENTO, CA 95812	68-0188897	501 (c) (3)	30,000.				GENERAL SUPPORT
LONG DOG DACHSUND RESC 98 STANLEY DR NEWPORT NEWS, VA 23608	26-2834156	501 (c) (3)	8,582.				GENERAL SUPPORT
LOVING COMPANION ANIMA 1360 OLD RICHARDSON HWY NORTH POLE, AK 99705	72-1578941	501 (c) (3)	11,610.				GENERAL SUPPORT
MAIN GRYHND PLACE SERV 505 EAST MAIN ST YARMOUTH, ME 04096	04-3387579	501 (c) (3)	9,177.				GENERAL SUPPORT
MARIAN ROSENTHAL FOUND 106 BOOTH HILL RD TRUMBULL, CT 06611	22-2485794	501 (c) (3)	19,500.				GENERAL SUPPORT
MARICOPA COUNTY ANIMAL 2500 S 27TH AVE PHOENIX, AZ 85016	86-6000472	501 (c) (3)	6,444.	22. FMV		MERCHANDIS E	GENERAL SUPPORT
MARTIN COUNTY HUMANE PO BOX 123 FAIRMONT, MN 56031	41-1678502	501 (c) (3)	6,885.	19. FMV		MERCHANDIS E	GENERAL SUPPORT
MAYORS ALLIANCE FOR AN 244 FIFTH AVE STE R290 NEW YORK, NY 10001	73-1653635	501 (c) (3)	53,455.				GENERAL SUPPORT
MEADOW GATES FARM SANC 3291 N PITTMAN RD WASTILLA, AK 99654	20-0101248	501 (c) (3)	5,340.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
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MICHIGAN HUMANE SOCIETY 30300 TELEGRAPH RD BINGHAM FARMS, MI 48025	38-1358206	501 (c) (3)	37,000.				GENERAL SUPPORT
MIDWEST DOBERMAN RESCU PO BOX 406 ST CHARLES, MO 63302	43-1403720	501 (c) (3)	7,687.				GENERAL SUPPORT
MIGHTY MUTTS INC 203 E 26TH ST NEW YORK CITY, NY 10010	11-3260202	501 (c) (3)	15,000.				GENERAL SUPPORT
MINNESOTA HOMEWARD BOU 10377 95TH STREET NE MONTICELLO, MN 55362	41-1956351	501 (c) (3)	4,136.	947.	FMV	MERCHANDIS E	GENERAL SUPPORT
MINNOTA COMP RABBIT SO PO BOX 390691 EDINA, MN 55439	20-1864550	501 (c) (3)	7,447.	85.	FMV	MERCHANDIS E	GENERAL SUPPORT
MORRIS ANIMAL FOUNDATI 10200 E GIRARD AVE DENVER, CO 80231	84-6032307	501 (c) (3)	800,500.				GENERAL SUPPORT
MOTLEY ZOO ANIMAL RESC 23316 NE REDMOND FALL CIT REDMOND, WA 98053	26-4338166	501 (c) (3)	8,907.	269.	FMV	MERCHANDIS E	GENERAL SUPPORT
NAPERVILLE HUMANE SOCI 1620 W DIEHL RD NAPERVILLE, IL 60563	36-3040480	501 (c) (3)	33,515.	341.	FMV	MERCHANDIS E	GENERAL SUPPORT
NATCHITOCHE HOPE FOR PO BOX 2552 NATCHITOCHE, LA 71457	27-1004712	501 (c) (3)	5,755.				GENERAL SUPPORT
NEADS PO BOX 213 WEST BOYLSON, MA 01583	23-7281887	501 (c) (3)	15,000.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEVADA HUMANE SOCIETY 2825 LONGLEY LN RENO, NV 89502	88-0072720	501 (c) (3)	11,500.	283.	FMV	MERCHANDIS E	GENERAL SUPPORT
NEW BEGINNINGS SHIHTZU PO BOX 11562 MILWAUKEE, WI 53211	20-3252671	501 (c) (3)	8,053.	2,896.	FMV	MERCHANDIS E	GENERAL SUPPORT
NEW HAMPSHIRE SPCA PO BOX 196 STRATHAM, NH 03885	02-6000614	501 (c) (3)	7,617.	628.	FMV	MERCHANDIS E	GENERAL SUPPORT
NO MORE HOMELESS PETS 8029 S 700 E SANDY, UT 84070	87-0650022	501 (c) (3)	9,000.				GENERAL SUPPORT
NORFOLK HUMAN SOCIETY 167 NEPONSET STREET CANTON, MA 02021	04-3265776	501 (c) (3)	5,000.	619.	FMV	MECHANDISE	GENERAL SUPPORT
NORTH CAROLINA ROTTWEI 5613 OLD RIDGE RD RALEIGH, NC 27610	56-2227795	501 (c) (3)	5,730.				GENERAL SUPPORT
NORTHEAST ANIMAL SHELTER 347 HIGHLAND AVE SALEM, MA 01970	51-0183474	501 (c) (3)	496.	4,616.	FMV	MERCHANDIS E	GENERAL SUPPORT
OREGON FRIENDS OF ANIMAL PO BOX 1425 HILLSBORO, OR 97123	20-0003876	501 (c) (3)	9,001.	328.	FMV	MERCHANDIS E	GENERAL SUPPORT
OREGON HUMANE SOCIETY PO BOX 11364 PORTLAND, OR 97211	93-0386880	501 (c) (3)	4,655.	570.	FMV	MERCHANDIS E	GENERAL SUPPORT
ORPHAN ANIMAL RESCUE A 810 COMMERCE ST NEENAH, WI 54956	26-3388281	501 (c) (3)	7,667.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OSHKOSH AREA HUMANE SO 1925 SHELTER CT OSHKOSH, WI 54901	41-1780387	501 (c) (3)	6,000.	33.	FMV	MERCHANDIS	GENERAL SUPPORT
OUBACHE VALLEY FELINES 7300 E DEVONALD AVE TERRE HAUTE, IN 47805	59-3825345	501 (c) (3)	10,000.				GENERAL SUPPORT
FACT HUMANE SOCIETY PO BOX 841 DOWNERS GROVE, IL 60515	36-4351585	501 (c) (3)	22,438.	290.	FMV	MERCHANDIS	GENERAL SUPPORT
PALS FOR POCHES PO BOX 3879 HUMBLE, TX 77347	76-0632677	501 (c) (3)	6,880.	33.	FMV	MERCHANDIS	GENERAL SUPPORT
PATRIOTS PAWS SERV DOG 3689 CR 2522 ROYSE CITY, TX 75189	04-3815107	501 (c) (3)	44,630.	6,237.	FMV	MERCHANDIS	GENERAL SUPPORT
PAWS CHICAGO 1110 WEST 35TH STREET CHICAGO, IL 60609	36-4219778	501 (c) (3)	108,062.	434.	FMV	MERCHANDIS	GENERAL SUPPORT
PAWS HUMANE SOCIETY PO BOX 7722 ROCKFORD, IL 61126	36-3610447	501 (c) (3)	5,348.	1,320.	FMV	MERCHANDIS	GENERAL SUPPORT
PAWS OF AUSTIN 7202 S BROOK DR AUSTIN, TX 78736	04-3774629	501 (c) (3)	7,500.				GENERAL SUPPORT
PAWS OF CHICO SPAY NEU PO BOX 93 CHICP, CA 95927	20-4113959	501 (c) (3)	11,349.				GENERAL SUPPORT
PAWS SAN DIEGO COUNTY 4455 EUCLID AVE SAN DIEGO, CA 92115	33-0632209	501 (c) (3)	38,661.				GENERAL SUPPORT

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Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
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PEEWEE'S PET ADOPTION 1307 SARATOGA BLVD CORPUS CHRISTI, TX 78417	74-2746680	501(c)(3)	5,580.	19.	FMV	MERCHANDIS E	GENERAL SUPPORT
PEGGY ADAMS ANIMAL RES 3200 NORTH MILITARY TRAIL WEST PALM BEACH, FL 33409	59-0637811	501(c)(3)	13,557.				GENERAL SUPPORT
PENINSULA HUMANE SOCIE 12 AIRPORT BLVD SAN MATEO, CA 94401	94-1243665	501(c)(3)	8,557.	1,164.	FMV	MERCHANDIS E	GENERAL SUPPORT
PENNSYLVANIA SOCIETY F 350 E ERIE AVE PHILADELPHIA, PA 19134	23-1352269	501(c)(3)	23,457.	1,314.	FMV	MERCHANDIS E	GENERAL SUPPORT
PET ASSISTANCE 150 W 6TH ST STE 201 SAN PEDRO, CA 90731	95-6093481	501(c)(3)	5,390.	231.	FMV	MERCHANDIS E	GENERAL SUPPORT
PET HAVEN INC OF MINNE PO BOX 19105 MINNEAPOLIS, MN 55419	41-6040860	501(c)(3)	5,164.				GENERAL SUPPORT
PET PREVENT A LITTER O PO BOX 401 SAN MARCOS, TX 78667	74-2586062	501(c)(3)	8,500.				GENERAL SUPPORT
PET RESCUE SERVICES IN 206 HUMMINGBIRD LN LONEDELL, MO 63060	30-0201213	501(c)(3)	10,048.	385.	FMV	MERCHANDIS E	GENERAL SUPPORT
PETCO ANIMAL SUPPLIES 9125 RECHO RD SAN DIEGO, CA 92121	41-2214570	501(c)(3)	45,000.				GENERAL SUPPORT
PETFINDER.COM FOUNDATI PO BOX 16385 TUCSON, AZ 85732	87-0694641	501(c)(3)	75,000.				GENERAL SUPPORT

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Name of the organization		Employer identification number	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)					(h) Purpose of grant or assistance
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
THE PETCO FOUNDATION 645 HARRISON ST STE 100 SAN FRANCISCO, CA 94107	94-3049133	501 (c) (3)	52,683.	10,012.	FMV	MERCHANDISE	GENERAL SUPPORT	
PETS IN NEED PO BOX 58 RINGWOOD, IL 60072	36-3814384	501 (c) (3)	18,823.	337.	FMV	MERCHANDISE	GENERAL SUPPORT	
PETS LIFELINE 19686 ETH ST E SONOMA, CA 95476	94-2851279	501 (c) (3)	5,187.				GENERAL SUPPORT	
PETS LOW COST SPAY & N PO BOX 4669 WICHITA FALLS, TX 76308	68-0648159	501 (c) (3)	5,500.	67.	FMV	MERCHANDISE	GENERAL SUPPORT	
PHILADELPHIA GREYHOUND 2210 MURRAY ST PHILADELPHIA, PA 19115	32-0094677	501 (c) (3)	5,726.				GENERAL SUPPORT	
PLANNED PETHOOD INC PO BOX 350908 TOLEDO, OH 43615	34-1312028	501 (c) (3)	5,036.	310.	FMV	MERCHANDISE	GENERAL SUPPORT	
PLAQUEMINES ANIMAL WEL PO BOX 83 BELLE CHASSE, LA 70037	46-0519776	501 (c) (3)		9,987.	FMV	MERCHANDISE	GENERAL SUPPORT	
POODLE RESCUE OF NEW EN 32 JANE BAR CIR FRAMINGHAM, MA 01701	04-3477906	501 (c) (3)	14,414.	1,359.	FMV	MERCHANDISE	GENERAL SUPPORT	
FRANCING PAWS ANIMAL R 11820 BASILE RD PHILADELPHIA, PA 19154	26-4258671	501 (c) (3)	12,857.	1,939.	FMV	MERCHANDISE	GENERAL SUPPORT	
PRECIOUS PURRS & PAWS 6768 HONEYCUTT LN GLOUCESTER, VA 23061	05-0554221	501 (c) (3)	10,841.	86.	FMV	MERCHANDISE	GENERAL SUPPORT	

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Schedule I (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 2 of 3

Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREMIER CATS AND KITTE 6952 PLEASANTS VALLEY RD VACAVILLE, CA 95688	27-0486933	501 (c) (3)	12,145.				GENERAL SUPPORT
PROMOTION OF ANIMAL WE PO BOX 5715 OROVILLE, CA 95966	68-0193922	501 (c) (3)	15,647.				GENERAL SUPPORT
PROTECTIVE ANIMAL LEAG PO BOX 832012 RICHARDSON, TX 75082	75-1902295	501 (c) (3)	5,881.	991.	FMV	MERCHANDIS E	GENERAL SUPPORT
PROVERBS 12:10 ANML RE PO BOX 279 BURNS, TN 37209	06-1792932	501 (c) (3)	13,271.	1,980.	FMV	MERCHANDIS E	GENERAL SUPPORT
PUG RESCUE OF NEW ENGLA 17 JONES RD PELHAM, MA 01002	04-3517497	501 (c) (3)	8,187.	688.	FMV	MERCHANDIS E	GENERAL SUPPORT
PUTNAM FELINES INC 328 LAKE SHORE RD PUTNAM VALLEY, NY 10579	13-4333578	501 (c) (3)	17,000.				GENERAL SUPPORT
QUINCY HUMANE SOCIETY PO BOX 3173 QUINCY, IL 62305	73-6045284	501 (c) (3)	10,567.	181.	FMV	MERCHANDIS E	GENERAL SUPPORT
RABBIT RESCUE 703 SEEPORT DR ALLEN, TX 75013	31-1655830	501 (c) (3)	7,000.				GENERAL SUPPORT
RACCOON VALLEY HUMANE S PO BOX 38 BOONE, IA 50036	42-1409512	501 (c) (3)	5,789.	96.	FMV	MERCHANDIS E	GENERAL SUPPORT
RAINBOW FRIENDS ANIMAL PO BOX 1259 KURTSTOWN, HI 96760	99-0353068	501 (c) (3)	26,500.	253.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Schedule I (Form 990) 2010

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2010

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Continuation Page 2 of 3

Name of the organization		Employer identification number						
THE PETCO FOUNDATION		33-0845930						
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
RANCHO COASTAL HUMANE 389 REQUEZA ST ENCINITAS, CA 92024	95-2151583	501 (c) (3)	28,469.	50. FMV		MERCHANDIS E	GENERAL SUPPORT	
RESCUE HOUSE PO BOX 231336 ENCINITAS, CA 92033	77-0503065	501 (c) (3)	23,154.	3,163. FMV		MERCHANDIS E	GENERAL SUPPORT	
RESCUE ME RCHS INC 7696 W 100 N FARMLAND, IN 47340	36-4587153	501 (c) (3)	19,584.	43. FMV		MERCHANDIS E	GENERAL SUPPORT	
RICHMOND SOCIETY FOR T 2519 HERMITAGE ROAD RICHMOND, VA 23220	54-0506328	501 (c) (3)	14,902.				GENERAL SUPPORT	
RIVER CITY CAT RESCUE PO BOX 41326 SACRAMENTO, CA 95841	56-2631266	501 (c) (3)	12,289.	2. FMV		MERCHANDIS E	GENERAL SUPPORT	
ROANOKE VALLEY SPCA 1340 BALSWIN AVE NE ROANOKE, VA 24012	54-0679796	501 (c) (3)	5,302.				GENERAL SUPPORT	
ROCK COUNTY HUMANE SOC 222 ARCH STREET JANESVILLE, WI 53545	39-0973879	501 (c) (3)	20,273.				GENERAL SUPPORT	
ROYAL HOUND GREYHOUND 1747 S PROCTOR ST TACOMA, WA 98405	68-0509547	501 (c) (3)	6,184.				GENERAL SUPPORT	
S.T.A.R.T. PO BOX 1098 LITTLE FALLS, NJ 07424	52-1765363	501 (c) (3)	9,721.				GENERAL SUPPORT	
SAFE CAT FOUNDATION 318 SHAVANO WAY SAN RAMON, CA 94583	26-1921600	501 (c) (3)	4,997.	785. FMV		MERCHADISE	GENERAL SUPPORT	

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Schedule I Cont (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

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Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 2 of 3

Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT SETONS ORPHANED							GENERAL SUPPORT
1 SUMMEY ST							GENERAL SUPPORT
FREDERICKSBURG, VA 22406	20-8419405	501 (c) (3)	6,100.				GENERAL SUPPORT
SAN DIEGO HUMANE SOCIE							GENERAL SUPPORT
5500 GAINES ST	95-1661688	501 (c) (3)	200,000.				GENERAL SUPPORT
SAN DIEGO, CA 92110							GENERAL SUPPORT
SAN DIEGO POLICE FOUND							GENERAL SUPPORT
8910 UNIVERSITY CENTER LN	33-0785173	501 (c) (3)	39,011.				GENERAL SUPPORT
SAN DIEGO, CA 92122							GENERAL SUPPORT
SAVE A PET							GENERAL SUPPORT
31664 N FAIRFIELD RD	23-7304570	501 (c) (3)	16,825.	201.	FMV	MERCHANDIS E	GENERAL SUPPORT
GRAYSLAKE, IL 60030							GENERAL SUPPORT
SAVE OHIO STRAYS							GENERAL SUPPORT
336 1/2 OAK ST	20-2549010	501 (c) (3)	6,939.	150.	FMV	MERCHANDIS E	GENERAL SUPPORT
WADSWORTH, OH 44281							GENERAL SUPPORT
SAVE OUR SHELTER ANIMA							GENERAL SUPPORT
5431 SW 29TH	48-0972106	501 (c) (3)	11,500.				GENERAL SUPPORT
TOPEKA, KS 66614							GENERAL SUPPORT
SCND CHNCE ANIM SHELIT							GENERAL SUPPORT
PO BOX 136							GENERAL SUPPORT
EAST BROOKFIELD, MA 01515	04-3490671	501 (c) (3)	16,070.	1,155.	FMV	MERCHANDIS E	GENERAL SUPPORT
SECOND CHANCE ADOPTION							GENERAL SUPPORT
PO BOX 91916							GENERAL SUPPORT
ELK GROVE, IL 80007	36-4059788	501 (c) (3)	14,448.				GENERAL SUPPORT
SECOND CHANCE COMPANIO							GENERAL SUPPORT
PO BOX 2343							GENERAL SUPPORT
BATTLE GROUND, WA 98604	91-1639509	501 (c) (3)	17,481.	88.	FMV	MERCHANDIS E	GENERAL SUPPORT
SECOND CHANCE RESCUE C							GENERAL SUPPORT
26707 466TH AVE							GENERAL SUPPORT
SIoux FALLS, SD 57108	27-0120863	501 (c) (3)	6,125.	701.	FMV	MERCHANDIS E	GENERAL SUPPORT

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Schedule I Cont. (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

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Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 3 of 3

Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEEING EYE PO BOX 375 MORRISTOWN, NJ 07963	22-1539721	501 (c) (3)	14,479.				GENERAL SUPPORT
SHELBY HUMANE SOCIETY PO BOX 210 COLUMBIANA, AL 35051	63-0817987	501 (c) (3)	10,892.	288.	FMV	MERCHANDISE	GENERAL SUPPORT
SHELTER OUTREACH SERVI 78 DODGE RD ITHACA, NY 14850	06-1697719	501 (c) (3)	30,000.				GENERAL SUPPORT
SIODLAND HUMANE SOCIE 1015 TRIVIEW AVE SIOUX CITY, IA 51103	42-6000336	501 (c) (3)	5,585.	765.	FMV	MERCHANDISE	GENERAL SUPPORT
SNAP - SPAY, NEUTER... PO BOX 1373 LA JOLLA, CA 92038	33-0517862	501 (c) (3)	40,564.				GENERAL SUPPORT
SNAP PO BOX 70286 HOUSTON, TX 77270	07-6608925	501 (c) (3)	8,750.				GENERAL SUPPORT
SOUTH COUNTY CATS 26828 MAPLE VALLEY BLK D MAPLE VALLEY, WA 98038	20-5278961	501 (c) (3)	9,575.	165.	FMV	MERCHANDISE	GENERAL SUPPORT
SOUTHEASTERN GUIDE DOG 4210 77TH ST E PALMETTO, FL 34221	59-2252352	501 (c) (3)	14,479.				GENERAL SUPPORT
SPAY & NEUTER INTERMNT PO BOX 223 MCARTHUR, CA 96056	20-7288696	501 (c) (3)	6,502.				GENERAL SUPPORT
SPAYMART 28060 RD 215 PICAYUNE, MS 39466	72-1418016	501 (c) (3)	14,423.	68.	FMV	MERCHANDISE	GENERAL SUPPORT

Schedule I (Form 990) 2010

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Continuation Sheet for Schedule I (Form 990)

2010

➤ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 3 of 3

Name of the organization		Employer identification number 33-0845930						
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
THE PETCO FOUNDATION								
SPCA OF CONNECTICUT 359 SPRING HILL RD MONROE, CT 06468	16-1626329	501 (c) (3)	6,156.	310.	FMV	MERCHANDIS E	GENERAL SUPPORT	
SPCA SAN PAT COUNTY PO BOX 1693 ARANSAS PASS, TX 78335	56-2598436	501 (c) (3)	6,500.				GENERAL SUPPORT	
SPOKANE HUMANE SOCIETY PO BOX 6247 SPOKANE, WA 99217	91-0565011	501 (c) (3)	6,043.	575.	FMV	MERCHANDIS E	GENERAL SUPPORT	
ST. LOUIS SENIOR DOG 7488 RIVERMONT TRAIL HOUSE SPRINGS, MO 93051	01-0584486	501 (c) (3)	7,139.	127.	FMV	MERCHANDIS E	GENERAL SUPPORT	
STRAY/FERAL CAT RESCUE 5114 207TH ST NORTH FORREST LAKE, MN 55025	20-2100559	501 (c) (3)	7,300.				GENERAL SUPPORT	
SUMMER SPAY NEUTER ALL PO BOX 1834 GALLATIN, TN 37066	22-6417545	501 (c) (3)	7,500.				GENERAL SUPPORT	
SWT PEA FRIENDS OF RUT PO BOX 897 RUTLAND, MA 01543	04-3550699	501 (c) (3)	5,654.	396.	FMV	MERCHANDIS E	GENERAL SUPPORT	
TAILS HUMANE SOCIETY 2250 BARBER GREENE RD DEKALB, IL 60115	36-4334785	501 (c) (3)	5,614.	127.	FMV	MERCHANDIS E	GENERAL SUPPORT	
TENDER LOVING CANINES PO BOX 1244 SOLANA BEACH, CA 92075	33-0809688	501 (c) (3)	10,000.				GENERAL SUPPORT	
THE ARPHANAGE 2706 MAIN ST RIVERSIDE, CA 92501	33-0874012	501 (c) (3)	5,000.	82.	FMV	MERCHANDIS E	GENERAL SUPPORT	

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Schedule I Cont. (Form 990) 2010

Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 3 of 3

Name of the organization		Employer identification number					
THE PETCO FOUNDATION		33-0845930					
(a) Name and address of organization of government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TINY LOVING CANINES 2828 COCHRAN ST SIMI VALLEY, CA 93065	26-4639832	501 (c) (3)	10,181.				GENERAL SUPPORT
TINY PAWS KITTEN RESCU 4000 W 15TH STREET STILLWATER, OK 74074	20-2636365	501 (c) (3)	10,383.	240.	FMV	MERCHANDISE	GENERAL SUPPORT
TOURNIQUET INC 148-11 SECOND AVE WHITESTONE, NY 11357	11-3639854	501 (c) (3)	5,919.	99.	FMV	MERCHANDISE	GENERAL SUPPORT
TOWN CATS PO BOX 1828 MORGAN HILL, CA 95038	31-1580952	501 (c) (3)	30,032.	9.	FMV	MERCHANDISE	GENERAL SUPPORT
TOWN HEMPSTEAD ANML SH 3320 BELTACH AVE WANTAGH, NY 11793	11-6001292	501 (c) (3)	6,513.				GENERAL SUPPORT
TOWN OF RANGELY ANIMAL 407 1/2 BRONCO RD RANGELY, CO 81648	84-6000713	501 (c) (3)	6,500.				GENERAL SUPPORT
UNCLE JACK'S CATS 6658 W NANCY RD GLENDALE, AZ 85306	54-2173624	501 (c) (3)	10,773.				GENERAL SUPPORT
UTAH ANIMAL ADOPTION C 1955 N REDWOOD RD SALT LAKE CITY, UT 84116	94-2950501	501 (c) (3)	5,378.	188.	FMV	MERCHANDISE	GENERAL SUPPORT
VERNON ALL ANIMAL ADOPT PO BOX 591 WESTBROOK, CT 06498	06-1364861	501 (c) (3)	12,732.				GENERAL SUPPORT
VOICELESS MI PO BOX 730 CHARLOTTE, MI 48813	27-0725920	501 (c) (3)	5,000.	344.	FMV	MERCHANDISE	GENERAL SUPPORT

Schedule I (Cont (Form 990) 2010

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Continuation Sheet for Schedule I (Form 990)

2010

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 3 of 3

Name of the organization		Employer identification number		Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)						
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE PETCO FOUNDATION		33-0845930								
VOLUNTEERS OF MUSKEGON 3840 EASTBROOK DR MUSKEGON, MI 49444	38-3590598	501 (c) (3)	16,238.	188.	FMV	MERCHANDIS E	GENERAL SUPPORT			
WASHINGTON CNTY HUMANE 3650 HWY 50 SLINGER, WI 53086	23-7009054	501 (c) (3)	6,099.				GENERAL SUPPORT			
WAYWARD PAWS INC 3205 BUSH RD JAMESVILLE, NY 13078	20-5193155	501 (c) (3)	5,356.	1,935.	FMV	MERCHANDIS E	GENERAL SUPPORT			
WENATCHEE VALLEY HUMAN 1474 S WENATCHEE AVE WENATCHEE, WA 98801	91-0838299	501 (c) (3)	24,711.	143.	FMV	MERCHANDIS E	GENERAL SUPPORT			
WESNIP 424 W BAKERVILLE RD BILLINGHAM, WA 98226	26-3529730	501 (c) (3)	10,000.				GENERAL SUPPORT			
WHISKERS AND WAGS 4 AD 730 ANNA PLACE NORTH PLAINFIELD, NJ 07063	02-0722918	501 (c) (3)	5,036.				GENERAL SUPPORT			
WHISKERS TAILS & FERAL 1370 TRASCAS ST STE 206 NAPA, CA 94558	68-0437611	501 (c) (3)	5,319.	640.	FMV	MERCHANDIS E	GENERAL SUPPORT			
WRIGHT WAY RESCUE 4299 E RAMON RD PALM SPRINGS, CA 92264	37-1489618	501 (c) (3)	15,137.				GENERAL SUPPORT			
YANKEE GOLDEN RETRIEVE PO BOX 808 HUDSON, MA 01749	04-2857191	501 (c) (3)	34,987.				GENERAL SUPPORT			
ZANIS FURRY FRIENDS 501 E 87TH ST NEW YORK, NY 10128	20-5050527	501 (c) (3)	6,970.				GENERAL SUPPORT			

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Schedule I Cont (Form 990) 2010

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2010

▶ Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

THE PETCO FOUNDATION

33-0845930

Part III Questions Regarding Compensation

1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment from the organization or a related organization?
- b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c Participate in, or receive payment from, an equity-based compensation arrangement?
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
- b Any related organization?
- If 'Yes' to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
- b Any related organization?
- If 'Yes' to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III

9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1 a		
1 b		
2		
3		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8		X
9		

PAUL Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 PAUL JOLLY	(i) 151,185.	(ii) 54,252.	(iii) 19,947.	0.	2,839.	228,223.	0.
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Area with horizontal dashed lines for supplemental information.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization
THE PETCO FOUNDATION

Employer identification number
33-0845930

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958. ▶ \$ _____
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total					▶ \$ _____					

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) PETCO ANIMAL SUPPLIES	CURRNT OFFICER	1,168,968.	ADMIN AND PROMOTIONAL		X
(2) PETCO ANIMAL SUPPLIES	CURRNT OFFICER	244,623.	MERCHANSDISE TRANSFERS		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

Open To Public Inspection

▶ Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art.....				
2 Art—Historical treasures.....				
3 Art—Fractional interests.....				
4 Books and publications.....				
5 Clothing and household goods.....				
6 Cars and other vehicles.....				
7 Boats and planes.....				
8 Intellectual property.....				
9 Securities—Publicly traded.....				
10 Securities—Closely held stock.....				
11 Securities—Partnership, LLC, or trust interests.....				
12 Securities—Miscellaneous.....				
13 Qualified conservation contribution—Historic structures.....				
14 Qualified conservation contribution—Other.....				
15 Real estate—Residential.....				
16 Real estate—Commercial.....				
17 Real estate—Other.....				
18 Collectibles.....				
19 Food inventory.....				
20 Drugs and medical supplies.....				
21 Taxidermy.....				
22 Historical artifacts.....				
23 Scientific specimens.....				
24 Archeological artifacts.....				
25 Other ▶ (PET FOOD/SUPPL.....)		1099	244,623	COST
26 Other ▶ (.....)				
27 Other ▶ (.....)				
28 Other ▶ (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement.....

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?.....

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?.....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?.....

b If 'Yes,' describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2010

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.

Area with horizontal dashed lines for supplemental information.

SCHEDULE R
(Form 990)

2010

Related Organizations and Unrelated Partnerships

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

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
THE PETCO FOUNDATION

Employer identification number
33-0845930

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

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

(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 section 501(c)(3))	(f) Direct controlling entity	(g) Sec. 512(b)(13) controlled entity?	
						Yes	No
(1) -----							
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership 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) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to 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) Percentage ownership
(1) PETCO ANIMAL SUPPLIES STORES, INC. 9125 REHCO ROAD SAN DIEGO, CA 92121 33-0479906	RETAIL SALES	DE	N/A	C-CORP	0.	0.	
(2) -----							
(3) -----							

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) annuities (ii) royalties (iv) rent from a controlled entity		X
b	Gift, grant, or capital contribution to other organization(s)	X	
c	Gift, grant, or capital contribution from other organization(s)		X
d	Loans or loan guarantees to or for other organization(s)		X
e	Loans or loan guarantees by other organization(s)		X
f	Sale of assets to other organization(s)		X
g	Purchase of assets from other organization(s)		X
h	Exchange of assets		X
i	Lease of facilities, equipment, or other assets to other organization(s)		X
j	Lease of facilities, equipment, or other assets from other organization(s)		X
k	Performance of services or membership or fundraising solicitations for other organization(s)		X
l	Performance of services or membership or fundraising solicitations by other organization(s)		X
m	Sharing of facilities, equipment, mailing lists, or other assets		X
n	Sharing of paid employees		X
o	Reimbursement paid to other organization for expenses		X
p	Reimbursement paid by other organization for expenses		X
q	Other transfer of cash or property to other organization(s)		X
r	Other transfer of cash or property from other organization(s)		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
PETCO ANIMAL SUPPLIES STORES, INC.	b	244,623.	COST
PETCO ANIMAL SUPPLIES STORES, INC.	o	1,168,968.	COST

Part VII Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to 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) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No
(1) ----- ----- ----- ----- -----										
(2) ----- ----- ----- ----- -----										
(3) ----- ----- ----- ----- -----										
(4) ----- ----- ----- ----- -----										
(5) ----- ----- ----- ----- -----										
(6) ----- ----- ----- ----- -----										
(7) ----- ----- ----- ----- -----										
(8) ----- ----- ----- ----- -----										

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R
(see instructions).

Area with horizontal dashed lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

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

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

FORM 990, PART VII

CHARLES PISCITELLO, KEVIN WHALEN, DAVE CARR, PEGGY HILLIER, REG HOLDEN, LANCE

SCHWIMMER, AND ELISABETH CHARLES ARE EMPLOYEES OF PETCO ANIMAL SUPPLIES, INC. WHO

VOLUNTEER THEIR TIME TO SERVICE ON THE BOARD OF PETCO FOUNDATION. THE FOUNDATION

INCURS NO EXPENSE RELATED TO THE SALARIES PAID BY PETCO ANIMAL SUPPLIES, INC. AND

THEREFORE NO COMPENSATION REPORTING FOR THESE INDIVIDUALS IS BEING INCLUDED ON PETCO

FOUNDATION'S FORM 990 IN ACCORDANCE WITH THE "VOLUNTEER EXCEPTION."

PAUL JOLLY, EXECUTIVE DIRECTOR, DEVOTES 8 HOURS OF SERVICE TO PETCO ANIMAL SUPPLIES,

INC. IN ADDITION TO HIS TIME DEVOTED TO PETCO ANIMAL FOUNDATION.

FORM 990, PART IX, LINES 6 AND 7, AND PART I, LINE 5

WAGES ARE PAID BY PETCO ANIMAL SUPPLIES, INC. AND REIMBURSED BY PETCO FOUNDATION.

Form 990, Part III, Line 4a - Program Service Accomplishments

APPLICATION FOR SUPPORT: ANIMAL WELFARE GROUPS ACROSS THE UNITED STATES CAN APPLY FOR

SUPPORT THROUGH THE PETCO FOUNDATION. REQUESTS FOR SUPPORT MUST ADDRESS ONE OR MORE

ASPECTS OF OUR 4 R'S. RESCUE, REDUCE, REHABILITATION, AND REJOICE. THESE REQUESTS MAY

ALSO BE FOR EVENT SPONSORSHIP, SPECIAL PROGRAMS, OR PRODUCT DONATIONS.

ADOPTION OPTIONS: PETFINDER.COM AND THE PETCO FOUNDATION HAVE TEAMED UP TO PROVIDE

NATIONALLY KNOWN EXPERTS ON INCREASING ADOPTIONS TO SPEAK TO LOCAL AUDIENCES AROUND

THE COUNTRY AND AT A FRACTION OF THE PRICE THAT WOULD NORMALLY BE INCURRED IF

ATTENDING A LARGE ANIMAL WELFARE CONFERENCE. ATTENDEES OF ADOPTION OPTIONS WORKSHOPS

ARE TREATED TO 4 OR 5 SPEAKERS ON THOUGHT PROVOKING AND GROUNDBREAKING ANIMAL

ADOPTION TOPICS, A VEGETARIAN BREAKFAST AND LUNCH, T-SHIRTS, PRIZES AND MORE.

ANIMAL SHELTERS IN PETCO STORES: THROUGH A UNIQUE PARTNERSHIP WITH PETCO ANIMAL

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Form 990, Part III, Line 4a - Program Service Accomplishments

SUPPLIES AND THE VARIOUS ANIMAL WELFARE GROUPS, THE PETCO FOUNDATION HAS CREATED SATELLITE ANIMAL SHELTER LOCATIONS WITHIN A LOCAL PETCO STORE. THESE MINI-SHELTERS ARE OPEN WHENEVER PETCO IS OPEN AND PROVIDE ACCESS TO ADOPTABLE DOGS, CATS AND OTHER SMALL ANIMALS BY A VERY DESIRABLE DEMOGRAPHIC OF POTENTIAL ANIMAL ADOPTERS.

DISASTER RELIEF ASSISTANCE: THE PETCO FOUNDATION RESPONDS TO DISASTERS AFFECTING ANIMALS AND THE PEOPLE WHO LOVE AND NEED THEM. DURING FIRES, FLOODS, EARTHQUAKES, HURRICANES, AND OTHER NATURAL DISASTERS THE PETCO FOUNDATION DIRECTS MONETARY AND PRODUCT DONATIONS TO WHERE THEY ARE NEEDED MOST THROUGH IDENTIFIED LEAD ANIMAL WELFARE AGENCIES IN THE AFFECTED AREAS.

WE ARE FAMILY TOO: THE PETCO FOUNDATION IS FUNDING LOCAL PROGRAMS THAT ADDRESS THE LOOMING DIFFICULT FINANCIAL CLIMATE WITH OUR "WE ARE FAMILY TOO" FUNDS. THIS IS IN RESPONSE TO THE INCREASE IN SURRENDERED ANIMALS BEING EXPERIENCED BY ANIMAL SHELTER DUE TO FORECLOSURES AND EVICTIONS. THE FOUNDATION IS PROVIDING SEED FUNDS TO PROGRAMS THAT HELP FAMILIES STAY TOGETHER WITH THEIR COMPANION ANIMALS DURING THESE HARD ECONOMIC TIMES.

MAKE A WISH PROGRAM: THE PETCO FOUNDATION HAS PARTNERED WITH THE MAKE A WISH ORGANIZATION TO ASSIST IN THE FULFILLMENT OF WISHES THAT INVOLVE COMPANION ANIMALS. WISH CHILDREN ARE TREATED TO A \$500 SHOPPING SPREE AT THE PETCO STORE OF THEIR CHOICE. PRODUCTS ARE SELECTED BY THE WISH CHILD OR BY THEIR REPRESENTATIVE WITH THE ASSISTANCE OF PETCO STORE PERSONNEL.

FOOD BANK PROGRAM: THE PETCO FOUNDATION PROVIDES COLLECTION BINS IN EVERY PETCO STORE AND THEY ARE PARTNERED WITH A LOCAL PET FOOD BANK. DONATED FOOD IS COLLECTED ON A

Name of the organization

THE PETCO FOUNDATION

Employer identification number

33-0845930

Form 990, Part III, Line 4a - Program Service Accomplishments

REGULAR BASIS AND DISTRIBUTED THROUGH LOCAL PET FOOD DISTRIBUTION PROGRAMS. VARIOUS PROMOTIONS ARE RUN THROUGHOUT THE YEAR TO PROMOTE AND ENHANCE THIS ON-GOING PROGRAM.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

THE FOLLOWING BOARD MEMBERS HAVE A BUSINESS RELATIONSHIP: CHARLES PISCITELLO, KEVIN WHALEN, DAVE CARR, PEGGY HILLIER, REG HOLDEN, LANCE SCHWIMMER, AND ELISABETH CHARLES.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

PETCO ANIMAL SUPPLIES, INC. HAS THE RIGHT TO APPOINT BOARD MEMBERS OF THE PETCO FOUNDATION.

Form 990, Part VI, Line 11b - Form 990 Review Process

FORM 990 IS PREPARED BY AN OUTSIDE TAX PREPARER AND REVIEWED BY MANAGEMENT OF THE ORGANIZATION. PRIOR TO THE FILING OF THE FORM 990, A DRAFT COPY IS PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

THE ORGANIZATION MONITORS ITS CONFLICT OF INTEREST POLICY BY HAVING ALL OFFICERS AND DIRECTORS COMPLETE ANNUAL CONFLICT OF INTEREST STATEMENTS. THESE ANNUAL DISCLOSURES ARE REVIEWED AND ADDRESSED BY THE BOARD'S GOVERNANCE COMMITTEE. IF IT IS DETERMINED THAT A CONFLICT OF INTEREST EXISTS, THAT INDIVIDUAL CANNOT PARTICIPATE IN THE DELIBERATIONS OR VOTE WITH RESPECT OF TRANSACTIONS RELATED TO THE CONFLICT.

Form 990, Part VI, Line 17 - List of States which this Return is Filed

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

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.