

Form 990 Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 OMB No 1545-0047
2012
 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 08-01-2012, 2012, and ending 07-31-2013

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

C Name of organization: SPAY NEUTER PROJECT OF LOS ANGELES INC
 Doing Business As:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 957 N GAFFEY STREET
 City or town, state or country, and ZIP + 4: SAN PEDRO, CA 90731

D Employer identification number: 20-8542566

E Telephone number: (310) 241-0766

F Name and address of principal officer: CHARLES BRADLEY, 957 N GAFFEY STREET, SAN PEDRO, CA 90731

G Gross receipts \$ 2,753,007

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)
H(c) Group exemption number

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

J Website: N/A

K Form of organization: Corporation Trust Association Other

L Year of formation: 2007 **M** State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
 See Part III, Line 1

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** 8

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 8

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) **5** 63

6 Total number of volunteers (estimate if necessary) **6** 200

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
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,003,920	387,188
	9 Program service revenue (Part VIII, line 2g)	1,953,291	2,365,800
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,574	19
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,958,785	2,753,007
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,551,045	1,827,801
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶86,082		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,111,321	1,347,039
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,662,366	3,174,840	
19 Revenue less expenses Subtract line 18 from line 12	296,419	-421,833	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 863,743	End of Year 568,299
	21 Total liabilities (Part X, line 26)	239,440	365,829
	22 Net assets or fund balances Subtract line 21 from line 20	624,303	202,470

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 Bradley
 Date: 2014-05-23
 CHARLES BRADLEY CHIEF EXECUTIVE OFFICER
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: JOHN M ARNDT CPA
 Preparer's signature: [Signature]
 Date: 2014-05-23
 Check if self-employed
 PTIN:
 Firm's name: ARNDT CONSULTING LLC
 Firm's EIN:
 Firm's address: 15050 W NORTH AVE
 Phone no: (414) 444-4340
 BROOKFIELD, WI 53005

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