

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

2001

Open to Public Inspection

Form 990-EZ

Department of the Treasury Internal Revenue Service

A For the 2001 calendar year, or tax year beginning 2001, and ending 20

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: Golden Beginnings Golden Retriever Rescue, Inc. D Employer identification number: 76:0605942. E Telephone number: (281) 480-4942. F Enter 4-digit (GEN):

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting method: [X] Cash [ ] Accrual Other (specify):

I Web site: www.goldenbeginnings.org. J Organization type (check only one): [X] 501(c) (3) [ ] 4947(a)(1) or [ ] 527. H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check [ ] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Add lines 5b, 6b, and 7b to line 9 to determine gross receipts. If \$100,000 or more, file Form 990 instead of Form 990-EZ. Total: \$75,856

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 35)

Table with 3 columns: Description, Line Number, Amount. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Total revenue is 75,856. Total expenses is 81,006. Net assets at end of year is 2,682.

Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

Table with 3 columns: Description, (A) Beginning of year, (B) End of year. Rows include Cash savings and investments, Land and buildings, Other assets, Total assets, Total liabilities, and Net assets or fund balances.

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| Part III Statement of Program Service Accomplishments (See Specific Instructions on page 40)   |             | Expenses<br>(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts optional for others) |        |
|--|-------------|--|--------|
| What is the organization's primary exempt purpose? <b>See Attachment B</b>   |             |  |        |
| Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title |             |  |        |
| 28 See Attachment C  | (Grants \$) | 28a  | 81,006 |
| 29   | (Grants \$) | 29a  |        |
| 30   | (Grants \$) | 30a  |        |
| 31 Other program services (attach schedule)  | (Grants \$) | 31a  |        |
| 32 Total program service expenses (add lines 28a through 31a)  |             | 32   | 81,006 |

| Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See Specific Instructions on page 40) |  |   |   |  |
|---|--|---|---|--|
| (A) Name and address  | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation | (E) Expense account and other allowances |
| Shen Anderson<br>921 Roberts, El Campo, TX 77437  | Director/Pres 50-60 hrs                                  | 0   | 0   | 0  |
| Robin Baker<br>15422 Bay Cove Court, Houston, TX 77059  | Treasurer 20 hrs   | 0   | 0   | 0  |
| Joni Johnson<br>3318 Robinson Road, Missouri City, TX 77459   | Director/Sec 15 hrs                                      | 0   | 0   | 0  |

| Part V Other Information (Note the attachment requirement in General Instruction V, page 14)   |                                   | Yes          | No                       |
|--|-----------------------------------|--------------|--------------------------|
| 33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity  |                                   |              | ✓                        |
| 34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes  |                                   |              | ✓                        |
| 35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T |                                   |              |                          |
| a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?   |                                   |              | ✓                        |
| b If "Yes" has it filed a tax return on Form 990-T for this year?  |                                   |              | ✓                        |
| 36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)   |                                   |              | ✓                        |
| 37a Enter amount of political expenditures, direct or indirect, as described in the instructions   | 37a 0                             |              | ✓                        |
| b Did the organization file Form 1120-POL for this year?   |                                   |              | ✓                        |
| 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return?                  |                                   |              | ✓                        |
| b If "Yes" attach the schedule specified in the line 38 instructions and enter the amount involved   | 38b                               |              |                          |
| 39 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9  | 39a                               |              |                          |
| b Gross receipts, included on line 9, for public use of club facilities  | 39b                               |              |                          |
| 40a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911   | 0                                 |              |                          |
| b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation      |                                   |              | ✓                        |
| c Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958  |                                   |              | 0                        |
| d Enter Amount of tax on line 40c, above, reimbursed by the organization   |                                   |              | 0                        |
| 41 List the states with which a copy of this return is filed   | Texas                             |              |                          |
| 42 The books are in care of  | Robin Baker                       | Telephone no | (281) 480-4942           |
| Located at   | 15422 Bay Cove Court, Houston, TX | ZIP + 4      | 77059-5820               |
| 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here   |                                   |              | <input type="checkbox"/> |
| and enter the amount of tax-exempt interest received or accrued during the tax year  | 43                                |              |                          |

Please 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.

*Robin P Baker* Date 4-26-02

*er*

Date \_\_\_\_\_ Check if \_\_\_\_\_ Preparer's SSN or PTIN (See Gen. Inst. W)

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under Section 501(c)(3)**

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

OMB No 1545-0047

**2001**

Department of the Treasury  
Internal Revenue Service

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

|   |   |
|---|---|
| Name of the organization<br><b>Golden Beginnings Golden Retriever Rescue, Inc</b> | Employer identification number<br><b>76 0605942</b> |
|---|---|

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None ")

| (a) Name and address of each employee paid more than \$50 000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| None  |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| .....   |  |                  |   |  |
| Total number of other employees paid over \$50 000 ▶          |  |                  |   |  |

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

| (a) Name and address of each independent contractor paid more than \$50 000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| None  |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| .....   |                     |                  |
| Total number of others receiving over \$50 000 for professional services ▶  |                     |                  |

**Part III Statements About Activities** (See page 2 of the instructions)

|  | Yes | No |
|--|-----|----|
| <p><b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes" enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A or line I of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p> |     | ✓  |
| <b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes" attach a detailed statement explaining the transactions.)   |     |    |
| <b>a</b> Sale, exchange, or leasing of property?   |     | ✓  |
| <b>b</b> Lending of money or other extension of credit?  |     | ✓  |
| <b>c</b> Furnishing of goods, services, or facilities?   |     | ✓  |
| <b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?   |     | ✓  |
| <b>e</b> Transfer of any part of its income or assets?   |     | ✓  |
| <b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)   |     | ✓  |
| <b>4</b> Do you have a section 403(b) annuity plan for your employees?   |     | ✓  |
| <p><b>Note:</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.</p>   |     |    |

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  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 charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

| (a) Name(s) of supported organization(s) | (b) Line number from above |
|--|----------------------------|
|  |                            |
|  |                            |
|  |                            |

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

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

**Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

| Calendar year (or fiscal year beginning in)  | (a) 2000 | (b) 1999 | (c) 1998  | (d) 1997  | (e) Total |
|--|----------|----------|-----------|-----------|-----------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)  | 50,592   | 17,558   | Organized | Organized | 68,150    |
| 16 Membership fees received  |          |          | In 1999   | In 1999   |           |
| 17 Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable etc. purpose  |          |          |           |           |           |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 | 29       | 4        |           |           | 33        |
| 19 Net income from unrelated business activities not included in line 18   |          |          |           |           |           |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf  |          |          |           |           |           |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge  |          |          |           |           |           |
| 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets  |          |          |           |           |           |
| 23 Total of lines 15 through 22  | 50,621   | 17,562   |           |           | 68,183    |
| 24 Line 23 minus line 17   | 50,621   | 17,562   |           |           | 68,183    |
| 25 Enter 1% of line 23   | 506      | 176      |           |           |           |

|  |   |   |     |        |
|--|---|---|-----|--------|
| 26 Organizations described on lines 10 or 11   | a Enter 2% of amount in column (e), line 24 | ▶ | 26a | 1,364  |
| b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts |   | ▶ | 26b | 11,220 |
| c Total support for section 509(a)(1) test. Enter line 24, column (e)  |   | ▶ | 26c | 68,183 |
| d Add Amounts from column (e) for lines  | 18 <u>33</u> 19 <u>0</u>                    |   | 26d | 11,253 |
|  | 22 <u>0</u> 26b <u>11,220</u>               |   | 26e | 56,930 |
| e Public support (line 26c minus line 26d total)   |   | ▶ | 26f | 83 %   |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator))   |   | ▶ |     |        |

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a disqualified person, prepare a list for your records to show the name of, and total amounts received in each year from each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year

(2000) ..... (1999) ..... (1998) ..... (1997) .....

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year

(2000) ..... (1999) ..... (1998) ..... (1997) .....

|  |                   |          |     |   |
|--|-------------------|----------|-----|---|
| c Add Amounts from column (e) for lines  | 15 _____ 16 _____ |          | 27c |   |
|  | 17 _____ 20 _____ | 21 _____ | 27d |   |
| d Add Line 27a total _____ and line 27b total _____  |                   |          | 27e |   |
| e Public support (line 27c total minus line 27d total)   |                   |          |     |   |
| f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)                  | ▶ [ 27f ]         |          |     |   |
| g Public support percentage (line 27e (numerator) divided by line 27f (denominator))               |                   | ▶        | 27g | % |
| h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) |                   | ▶        | 27h | % |

28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

GOLDEN BEGINNINGS GOLDEN RETRIEVER RESCUE, INC.  
P.O. Box 591806  
Houston, TX 77259-1806  
76-0605942

**Form 990EZ - Page 1**  
**PART I - Revenue, Expenses, and Changes in Net Assets or Fund Balances**  
**Line 16 - Other Expenses**

| <u>DESCRIPTION</u>                     | <u>AMOUNT</u>   |
|--|-----------------|
| Vetennary expenses                     | \$70,371        |
| General and administrative expenses    | 3,528           |
| Fundraising expenses                   | 2,502           |
| Insurance                              | 681             |
| Corporate and organizational expenses  | 5               |
| <b>Total, Line 16 - Other Expenses</b> | <b>\$77,087</b> |

Golden Beginnings Golden Retriever Rescue, Inc  
P O Box 591806  
Houston, TX 77259-1806  
76-0605942

**Form 990EZ - Page 2**

**Part III - Statement of Program Service Accomplishments**

**Question - What is the Organization's primary exempt purpose?**

Golden Beginnings Golden Retriever Rescue, Inc is a voluntary group of individuals dedicated to the rescue of displaced, abused and neglected Golden Retrievers. The organization provides any needed veterinary treatment and care, shelter, behavioral evaluations, foster homes, and ultimately locates permanent adoptive homes. The organization strives to do the following:

- 1 To provide shelter, veterinary care, and comprehensive evaluations for homeless, unwanted, stray, abandoned, abused, neglected or displaced Golden Retrievers regardless of age or health condition
  - In accepting dogs into the Rescue program, preference is given to those Golden Retrievers facing euthanasia, to those living in shelters and to those in untenable living situations. The organization also attempts to accommodate owner turn-ins, to keep these Golden Retrievers from facing such fates and to allow them to go from one home to another with less disruption.
  - Golden Retrievers brought into the program are generally identified through referrals, shelter contacts, and other neighboring rescue groups.
  - After initial temperament and medical evaluations, the Golden Retrievers are placed in volunteer foster homes. While in these foster homes, they are further evaluated for socialization skills and receive any additional necessary medical treatments, including spay or neuter.
  - Through adoption, the Rescue strives to find permanent loving homes for the Golden Retrievers, regardless of age or health status. The Rescue finds adoptive homes through referrals, organizational and community advertising and awareness, the Internet, organizational website and an application process. All adoptions are contingent upon application answers, personal interviews, home visits, reference checks and agreement to adoption contract terms.
  - All Golden Retrievers adopted or placed in permanent homes have been spayed or neutered.
  
- 2 The Organization seeks to reduce the numbers of unwanted, abused and neglected Golden Retrievers through
  - Rehabilitation – including spaying and neutering of all Golden Retrievers in the rescue program.
  - Education – of pet owners and the general public about responsible pet ownership including spaying and neutering, training and humane care of Golden Retrievers and other pets.
  - By cooperating with state and local authorities in the enforcement of laws related to the welfare of dogs.
  - By protecting the Golden Retriever from careless breeding in order to preserve the excellent qualities of the breed for future generations.

Golden Beginnings Golden Retriever Rescue, Inc  
P O Box 591806  
Houston, TX 77259-1806  
76-0605942

**Form 990EZ - Page 2**

**Part III - Statement of Program Service Accomplishments - continued -**

**Line 28 - Describe what was achieved in carrying out the organization's exempt purposes:**

For the calendar year 2001 the Rescue took into its program 238 displaced Golden Retrievers. All 238 Golden Retrievers received necessary veterinary care, including spays and neuters, heartworm treatments and other surgeries and medical care, costing \$70,371.

A total of 231 of these displaced Golden Retrievers were adopted and placed into screened adoptive homes. The Rescue did receive adoption donations totaling \$31,410 and donations from owners who surrendered Golden Retrievers to the Rescue of \$1,080 to help defray any necessary medical treatments and costs.

Attached is a list of statistical data for 1999 - 2001 that further details the number of intakes, adoptions and medical needs of the displaced Golden Retrievers taken into the Rescue program.

Adoptive homes are required to sign an adoption contract stipulating proper care of the adoptive Golden as well as remedies should an adoption not work out. Adoptive families are encouraged to participate in obedience classes. This class not only helps to create a bond between the new adoptive family and the Golden, but also helps establish good control and behavior of the Golden. Trainers are available on an "as-needed" basis to help adoptive homes with any issues that arise from transition and behavior.

The Rescue maintains an informative website, [www.goldenbeginnings.org](http://www.goldenbeginnings.org), that includes pictures and brief histories of the Golden Retrievers available for adoption as well as organizational information, links to informative articles and other websites, and pictures and letters from adoptive families. The Rescue also maintains a training website for volunteers on fostering, health and behavior issues, organizational operations and procedures.

The Rescue produces and distributes a quarterly newsletter that features Golden Retrievers available for adoption, adoption success stories, informative pieces on training, behavior issues, grooming, and the like, volunteer pictures and articles, organizational information and upcoming events.

The Rescue attends events targeted for animal rescue organizations to increase awareness and support of the Rescue.

The Rescue holds an annual "Rescue Picnic" in October or November. Every member, volunteer, adoptive family, contributor, friend, or family that shares a love of Golden Retrievers is invited to attend along with their Golden Retrievers.

Golden Beginnings Golden Retriever Rescue, Inc.  
**STATISTICAL RECAP**  
 1999- 2001

|                                | 2001            |       | 2000            |       | 1999*           |       |
|--------------------------------|-----------------|-------|-----------------|-------|-----------------|-------|
|                                | #               | %     | #               | %     | #               | %     |
| <b>INTAKES:</b>                |                 |       |                 |       |                 |       |
| YTD Intakes                    | 238             |       | 180             |       | 84              |       |
| <b>SOURCES OF INTAKE:</b>      |                 |       |                 |       |                 |       |
| Shelters                       | 104             | 43.7% | 80              | 44.4% | 42              | 50.0% |
| Strays                         | 41              | 17.2% | 35              | 19.4% | 19              | 22.6% |
| Owner Turnins                  | 60              | 25.2% | 59              | 32.8% | 16              | 19.0% |
| Other                          | 33              | 13.9% | 6               | 3.3%  | 7               | 8.3%  |
| <b>MEDICAL NEEDS:</b>          |                 |       |                 |       |                 |       |
| Spay/Neuter                    | 159             | 66.8% | 134             | 74.4% | 54              | 64.3% |
| Heartworm Positive             | 64              | 26.9% | 45              | 25.0% | 19              | 22.6% |
| Special Needs                  | 137             | 57.6% | 104             | 57.8% | 46              | 54.8% |
| Other Surgeries                | 22              | 9.2%  | 23              | 12.8% | 8               | 9.5%  |
| <b>AGE AND SEX:</b>            |                 |       |                 |       |                 |       |
| Under 1 year of age            | 53              | 22.3% | 56              | 31.1% | 27              | 32.1% |
| Seniors                        | 18              | 7.6%  | 14              | 7.8%  | 8               | 9.5%  |
| # of Females                   | 100             | 42.0% | 64              | 35.6% | 36              | 42.9% |
| # of Males                     | 138             | 58.0% | 116             | 64.4% | 48              | 57.1% |
| <b>COSTS PER INTAKE:</b>       |                 |       |                 |       |                 |       |
| Total veterinary costs to date | \$ 68,270       |       | \$ 34,773       |       | \$ 12,057       |       |
| AVERAGE COST PER INTAKE        | <u>\$ 287</u>   |       | <u>\$ 193</u>   |       | <u>\$ 144</u>   |       |
| Highest Cost Intake to date    | <u>\$ 9,005</u> |       | <u>\$ 3,100</u> |       | <u>\$ 1,517</u> |       |
| <b>ADOPTIONS:</b>              |                 |       |                 |       |                 |       |
| YTD adoptions                  | 231             |       | 167             |       | 74              |       |
| YTD adoption fees to date      | \$ 31,410       |       | \$ 19,041       |       | \$ 7,765        |       |
| AVERAGE ADOPTION FEE           | <u>\$ 136</u>   |       | <u>\$ 114</u>   |       | <u>\$ 105</u>   |       |

\* Information for the period May 12 - December 31, 1999