

2004

Open to Public Inspection

990-EZ

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.

Department of the Treasury Internal Revenue Service

A For the 2004 calendar year, or tax year beginning, 2004, and ending, 20

B Check if applicable:

- Address change
Name change
Initial return
Final return
Amended return
Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

Golden Beginnings Golden Retriever Rescue, Inc.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. Box 591806

City or town, state or country, and ZIP + 4
Houston, TX 77259-1806

D Employer identification number

76 : 0605942

E Telephone number

(281) 480-4942

F Group Exemption Number

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: Cash Accrual Other (specify)

I Website: www.gbgr.org

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Organization type (check only one) 501(c) 4947(a)(1) or 527

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. \$ 47,727

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 37 of the instructions.)

Table with 21 rows for Revenue, Expenses, and Net Assets. Includes sub-rows for detailed items like contributions, program revenue, and total revenue.

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 7 rows for Balance Sheets, showing beginning and end of year values for cash, land, and total assets/liabilities.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form 990-EZ (2004)

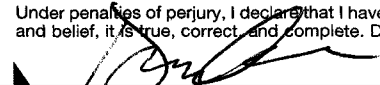
SCANNED AUG 23 2005

Part III Statement of Program Service Accomplishments (See page 41 of the instructions.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
What is the organization's primary exempt purpose? See Attachment 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 (2 Pages)	
	(Grants \$)	28a 54,657
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 54,657

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 41 of the instructions.)				
(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
Cecile Henson 3903 Oakwood Dr. N., Pearland, TX 77581	President - 40 Hours	0	0	0
Rechelle Gryparis 3422 Shadowbark Dr., Houston, TX 77082	Director - 30 Hours	0	0	0
Denise Hoelscher 5715 Parryville Dr., Houston, TX 77041	Treasurer - 20 Hours	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		<input checked="" type="checkbox"/>
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.		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		<input checked="" type="checkbox"/>
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		<input checked="" type="checkbox"/>
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
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 ▶ ; section 4912 ▶ ; section 4955 ▶		
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.		<input checked="" type="checkbox"/>
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶		
d	Enter: Amount of tax on line 40c, above, reimbursed by the organization ▶		
41	List the states with which a copy of this return is filed. ▶		
42	The books are in care of ▶ Cecile Henson Telephone no. ▶ (281) 992-3767 Located at ▶ 3903 Oakwood Dr. N., Pearland, TX ZIP + 4 ▶ 77581		
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		

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.

Please Sign  Date 07/09/05

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

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

2004

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 Golden Beginnings Golden Retriever Rescue, Inc.	Employer identification number 76 0605942
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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
1 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.) 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.		✓
2 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.)		
a Sale, exchange, or leasing of property?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
e Transfer of any part of its income or assets?		✓
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		✓
b Do you have a section 403(b) annuity plan for your employees?		✓
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

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 5 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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	46,849	70,772	75,817	50,592	244,030
16 Membership fees received					
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	21	20	39	29	109
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	46,870	70,792	75,856	50,621	244,139
24 Line 23 minus line 17	46,870	70,792	75,856	50,621	244,139
25 Enter 1% of line 23	469	708	759	506	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶	26a	4,883
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶	26b	0
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶	26c	244,139
d Add: Amounts from column (e) for lines: 18 <u>109</u> 19 _____		26d	109
22 _____ 26b _____	▶	26e	244,030
e Public support (line 26c minus line 26d total)	▶	26f	100 %
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:		(2003) _____ (2002) _____ (2001) _____ (2000) _____
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:		(2003) _____ (2002) _____ (2001) _____ (2000) _____
c Add: Amounts from column (e) for lines: 15 _____ 16 _____		17 _____ 20 _____ 21 _____
d Add: Line 27a total _____ and line 27b total _____	▶	27c
e Public support (line 27c total minus line 27d total)	▶	27d
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)	▶	27e
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶	27f
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶	27g
		27h

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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.

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) _____ _____ _____		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000. \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Golden Beginnings Golden Retriever Rescue, Inc.

P.O. Box 591806

Houston, TX 77259-1806

FEIN #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>
Veterinary Expenses	\$ 43,215
General and Administrative Expenses	2,369
Fundraising Expenses	5,352
Insurance	<u>1,789</u>
TOTAL Line 16 – Other Expenses	<u>\$ 52,725</u>

Golden Beginnings Golden Retriever Rescue, Inc.

P.O. Box 591806

Houston, TX 77259-1806

FEIN #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 Goldens from facing such fates and to allow them to go from one home to another with less disruption.
 - Goldens brought into the program are generally identified through referrals, shelter contacts and other neighboring rescue groups.
 - After initial temperament and medical evaluations, the Goldens 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 Goldens, 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 Goldens 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 Goldens 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

FEIN #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 purpose.

For the calendar year 2004, the Rescue took into its program 125 displaced Golden Retrievers. All 125 Goldens received necessary veterinary care, including spays and neuters, heartworm treatments and other surgeries and medical care costing \$43,215.

A total of 120 of these displaced Goldens were adopted and placed into screened adoptive homes. The Rescue did receive adoption donations totaling \$21,000 and donations from owners who surrendered Goldens to the Rescue of \$500 to help defray any necessary medical treatments and costs.

Attached is a list of statistical data for 2001-2004 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 home with any issues that arise from transition and behavior.

The Rescue maintains an informative website, www.gbgr.org, that includes pictures and brief histories of the Goldens 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 semiannual newsletter that features Goldens 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 May. Every member, volunteer, adoptive family, contributor, friend or family that shares a love of Goldens is invited to attend along with their Goldens.

Golden Beginnings Golden Retriever Rescue, Inc.

P.O. Box 591806
Houston, TX 77259-1806
FEIN #76-0605942

	<u>2004</u>		<u>2003</u>		<u>2002</u>		<u>2001</u>		<u>2000</u>		<u>1999</u>	
	#	%	#	%	#	%	#	%	#	%	#	%
<u>INTAKES:</u>												
YTD Intakes	125		109		155		238		180		84	
<u>SOURCES OF INTAKE:</u>												
Shelters	40	32.0%	66	60.6%	83	53.5%	104	43.7%	80	44.4%	42	50.0%
Strays	28	22.4%	15	13.8%	20	12.9%	41	17.2%	35	19.4%	19	22.6%
Owner Turn-Ins	19	15.2%	23	21.1%	44	28.4%	60	25.2%	59	32.8%	16	19.0%
Other	17	13.6%	4	3.7%	8	5.2%	33	13.9%	6	3.3%	7	8.3%
<u>MEDICAL NEEDS:</u>												
Spay/Neuter	89	71.2%	79	72.5%	93	60.0%	159	66.8%	134	74.4%	54	64.3%
Heartworm Positive	32	25.6%	32	29.4%	63	40.6%	64	26.9%	45	25.0%	19	22.6%
Special Needs	59	47.2%	49	45.0%	88	56.8%	137	57.6%	104	57.8%	46	54.8%
Other Surgeries	7	5.6%	10	9.2%	23	14.8%	22	9.2%	23	12.8%	8	9.5%
<u>AGE AND SEX:</u>												
Under 1 year old	40	32.0%	33	30.3%	33	21.3%	53	22.3%	56	31.1%	27	32.1%
Seniors	7	5.6%	6	5.5%	19	12.3%	18	7.6%	14	7.8%	8	9.5%
# of Males	49	39.2%	53	48.6%	69	44.5%	100	42.0%	64	35.6%	36	42.9%
# of Females	76	60.8%	55	50.5%	86	55.5%	138	58.0%	116	64.4%	48	57.1%
<u>COSTS PER INTAKE:</u>												
Total Veterinary Costs	\$ 43,215		\$ 41,380		\$ 56,384		\$ 70,371		\$ 39,102		\$ 12,057	
Average Cost per Intake	\$ 346		\$ 380		\$ 364		\$ 296		\$ 217		\$ 144	
<u>ADOPTIONS:</u>												
YTD Adoptions	120		117		164		231		167		74	
YTD Adoption Fees	\$ 21,000		\$ 22,475		\$ 27,550		\$ 31,410		\$ 18,891		\$ 7,765	
Average Adoption Fee	\$ 175		\$ 192		\$ 168		\$ 136		\$ 113		\$ 105	