**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) the organization may have to use a copy of this return to satisfy state reporting requirements.

### Part I: Summary

1. Briefly describe the organization's mission or most significant activities: To house and find suitable homes for homeless domestic animals; to reduce the number of unwanted domestic animals through aggressive spay & neuter programs.

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

3. Number of voting members of the governing body (Part VI, line 1a).

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

5. Total number of employees (Part V, line 2a).

6. Total number of volunteers (estimate if necessary).

7a. Total gross unrelated business revenue from Part VIII, line 12, column (C).

7b. Net unrelated business taxable income from Form 990-T, line 34.

### Revenue

8. Contributions and grants (Part VIII, line 1h).

9. Program service revenue (Part VIII, line 2g).

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d).

11. Other revenue (Part VIII, column (A), lines 5, 6d, 6c, 8c, 9c, 10c, and 11c).

12. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).

### Expenses

13. Grants and similar amounts paid (Part IX, column (A), lines 1–3).

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).

16a. Professional fundraising fees (Part IX, column (A), line 11e).

16b. Total fundraising expenses (Part IX, column (D), line 25).

17. Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f).

18. Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25).


### Net Assets or Fund Balances

20. Total assets (Part X, line 16).

21. Total liabilities (Part X, line 26).

22. Net assets or fund balances. Subtract line 21 from line 20.

### Signatures

**Laura Brown, President**

Date: 6/15/09

**Laura Brown, President**

[Type or print name and title]

**Preparer’s signature**

**Preparer’s identifying number (see instructions)**

**Preparer's (or your) name (if self-employed), address, and ZIP + 4**

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

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