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Or call the IRS Identity Theft Hotline at 1-800-908-4490





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Form 990

Department of the Treasury
Internal Revenue ServiceAmended
Return of Organization Exempt From Income TaxUnder 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.

OMB No. 1545-0047

2007

Open to Public
Inspection

A For the 2007 calendar year, or tax year beginning AUG 1, 2007 and ending JUL 31, 2008

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ROCKET DOG RESUCE INC	D Employer identification number 80-0000407
	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 460826	E Telephone number (415)846-2023
	Room/suite	F Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►
	City or town, state or country, and ZIP + 4 SAN FRANCISCO, CA 94146	
G Website ► WWW.ROCKETDOGRESUCE.ORG		H and I are not applicable to section 527 organizations
J Organization type (check only one) ► <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
K Check here ► <input type="checkbox"/> if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.		H(b) If "Yes," enter number of affiliates ► N/A
		H(c) Are all affiliates included? N/A <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list.)
		H(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		I Group Exemption Number ► N/A
L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 240,646.		M Check ► <input type="checkbox"/> if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

1 Contributions, gifts, grants, and similar amounts received: a Contributions to donor advised funds b Direct public support (not included on line 1a) c Indirect public support (not included on line 1a) d Government contributions (grants) (not included on line 1a) e Total (add lines 1a through 1d) (cash \$ 143,857. noncash \$ 143,857.)	1a 1b 1c 1d	1e 143,857.
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	64,203.
3 Membership dues and assessments	3	
4 Interest on savings and temporary cash investments	4	3,000.
5 Dividends and interest from securities	5	
6 a Gross rents b Less: rental expenses c Net rental income or (loss). Subtract line 6b from line 6a	6a 6b	<i>TPR RECEIVED DATE 01/21/11</i>
7 Other investment income (describe) ►	7	
8 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) (attach schedule) d Net gain or (loss). Combine line 8c, columns (A) and (B)	8a 8b 8c	<i>TPR BRANCH OGDEN</i>
9 Special events and activities (attach schedule). If any amount is from gaming, check here ► <input type="checkbox"/>	9a 9b	29,586. 3,370.
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10a 10b	<i>SEE STATEMENT 2 STATUTE UNIT RECEIVED</i>
11 Other revenue (from Part VII, line 103)	11	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	26,216.
13 Program services (from line 44, column (B))	13	<i>OCT 25 2013</i>
14 Management and general (from line 44, column (C))	14	<i>TPR BRANCH OGDEN</i>
15 Fundraising (from line 44, column (D))	15	
16 Payments to affiliates (attach schedule)	16	
17 Total expenses. Add lines 16 and 44, column (A)	17	210,705.
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	26,571.
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	16,369.
20 Other changes in net assets or fund balances (attach explanation)	20	0.
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	42,940.

723001
12-27-07

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

617 10

Form 990 (2007)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0. noncash \$ 0.)				
If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ 0. noncash \$ 0.)				
If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	0.	0.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(i)(1)) and persons described in section 4958(c)(3)(B)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26			
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31	2,500.	2,500.	
32 Legal fees	32			
33 Supplies	33	21,467.	20,903.	564.
34 Telephone	34			
35 Postage and shipping	35	2,151.	2,151.	
36 Occupancy	36	8,635.	8,635.	
37 Equipment rental and maintenance	37			
38 Printing and publications	38			
39 Travel	39			
40 Conferences, conventions, and meetings	40	2,941.	2,941.	
41 Interest	41	850.	850.	
42 Depreciation, depletion, etc (attach schedule)	42	4,389.	4,389.	
43 Other expenses not covered above (itemize)	43a			
a	43b			
b	43c			
c	43d			
d	43e			
e	43f			
f				
g SEE STATEMENT 3	43g	167,772.	142,535.	25,237.
44 Total functional expenses Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	210,705.	163,438.	47,267.
				0.

 Joint Costs. Check ► if you are following SOP 98-2

 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ► Yes No

 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A; (ii) the amount allocated to Program services \$ N/A; (iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ►

PET ADOPTION

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

a SEE STATEMENT 4

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

(Grants and allocations \$

) If this amount includes foreign grants, check here ►

163,438.

b

(Grants and allocations \$

) If this amount includes foreign grants, check here ►

c

(Grants and allocations \$

) If this amount includes foreign grants, check here ►

d

(Grants and allocations \$

) If this amount includes foreign grants, check here ►

e Other program services (attach schedule)

(Grants and allocations \$

) If this amount includes foreign grants, check here ►

f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►

163,438.

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Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			(A) Beginning of year	(B) End of year
	45	Cash - non-interest-bearing	11,711.	45
	46	Savings and temporary cash investments	850.	46
	47 a	Accounts receivable	47a	
	b	Less allowance for doubtful accounts	47b	47c
	48 a	Pledges receivable	48a	
	b	Less allowance for doubtful accounts	48b	48c
	49	Grants receivable		49
	50 a	Receivables from current and former officers, directors, trustees, and key employees		50a
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b
	51 a	Other notes and loans receivable	51a	
	b	Less: allowance for doubtful accounts	51b	51c
	52	Inventories for sale or use		52
	53	Prepaid expenses and deferred charges		53
	54 a	Investments - publicly-traded securities	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a
	b	Investments - other securities	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b
	55 a	Investments - land, buildings, and equipment basis	55a	
	b	Less accumulated depreciation	55b	55c
	56	Investments - other		56
	57 a	Land, buildings, and equipment basis	57a 21,556.	
	b	Less accumulated depreciation	57b 5,296.	3,808. 57c 16,260.
	58	Other assets, including program-related investments (describe ►)		58
	59	Total assets (must equal line 74) Add lines 45 through 58	16,369.	59 53,790.
	60	Accounts payable and accrued expenses		60
	61	Grants payable		61
	62	Deferred revenue		62
	63	Loans from officers, directors, trustees, and key employees		63 10,850.
	64 a	Tax-exempt bond liabilities		64a
	b	Mortgages and other notes payable		64b
	65	Other liabilities (describe ►)		65
	66	Total liabilities. Add lines 60 through 65	0.	66 10,850.
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67	Unrestricted	16,369.	67 42,940.
	68	Temporarily restricted		68
	69	Permanently restricted		69
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74			
	70	Capital stock, trust principal, or current funds		70
	71	Paid-in or capital surplus, or land, building, and equipment fund		71
	72	Retained earnings, endowment, accumulated income, or other funds		72
	73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	16,369.	73 42,940.
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	16,369.	74 53,790.

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Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

a Total revenue, gains, and other support per audited financial statements	a	N/A
b Amounts included on line a but not on Part I, line 12	b	
1 Net unrealized gains on investments	b1	
2 Donated services and use of facilities	b2	
3 Recoveries of prior year grants	b3	
4 Other (specify) _____ Add lines b1 through b4	b4	
c Subtract line b from line a	c	
d Amounts included on Part I, line 12, but not on line a:	d	
1 Investment expenses not included on Part I, line 6b	d1	
2 Other (specify) _____ Add lines d1 and d2	d2	
e Total revenue (Part I, line 12) Add lines c and d	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a Total expenses and losses per audited financial statements	a	N/A
b Amounts included on line a but not on Part I, line 17	b	
1 Donated services and use of facilities	b1	
2 Prior year adjustments reported on Part I, line 20	b2	
3 Losses reported on Part I, line 20	b3	
4 Other (specify) _____ Add lines b1 through b4	b4	
c Subtract line b from line a	c	
d Amounts included on Part I, line 17, but not on line a:	d	
1 Investment expenses not included on Part I, line 6b	d1	
2 Other (specify) _____ Add lines d1 and d2	d2	
e Total expenses (Part I, line 17) Add lines c and d	e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See 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 plans	(E) Expense account and other allowances
PALI BOUCHER SEE ORGANIZATION'S ADDRESS	PRESIDENT 40.00	0.	0.	0.
LAURA BECK SEE ORGANIZATION'S ADDRESS	VICE PRESIDENT 5.00	0.	0.	0.
ILLEANA MARTINEZ SEE ORGANIZATION'S ADDRESS	BOARD MEMBER 5.00	0.	0.	0.
RAFAEL MARTINEZ SEE ORGANIZATION'S ADDRESS	BOARD MEMBER 5.00	0.	0.	0.
BEVERLY ULRICH SEE ORGANIZATION'S ADDRESS	SECRETARY 5.00	0.	0.	0.
PAUL GIGLIOTTI SEE ORGANIZATION'S ADDRESS	TREASURER 20.00	0.	0.	0.
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----

Part VI Other Information (continued)

Yes No

82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations Enter. a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 ► 0 . ; section 4912 ► 0 . ; section 4955 ► 0 .		
b	501(c)(3) and 501(c)(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 a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	0 .
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	89d	0 .
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ► CA		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	0
91 a	The books are in care of ► PAUL GIGLIOTTI Located at ► SEE ORGANIZATION'S ADDRESS	Telephone no. ► 415-846-2023	
b	ZIP + 4 ►		
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)? If "Yes," enter the name of the foreign country ► N/A			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			

Part VI Other Information (continued)**Yes** **No**

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X
 If "Yes," enter the name of the foreign country ► **N/A**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions)

Note: Enter gross amounts unless otherwise indicated

93 Program service revenue

ADOPTION INCOME

a
 b
 c
 d
 e

f Medicare/Medicaid payments
 g Fees and contracts from government agencies

94 Membership dues and assessments

95 Interest on savings and temporary cash investments

96 Dividends and interest from securities

97 Net rental income or (loss) from real estate.

a debt-financed property
 b not debt-financed property

98 Net rental income or (loss) from personal property

99 Other investment income

100 Gain or (loss) from sales of assets
 other than inventory

101 Net income or (loss) from special events

102 Gross profit or (loss) from sales of inventory

103 Other revenue

a
 b
 c
 d
 e

104 Subtotal (add columns (B), (D), and (E))

105 Total (add line 104, columns (B), (D), and (E))

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Line No Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

93A PET ADOPTION REVENUE IS COLLECTED TO OFFSET EXPENSES.**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
N/A	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13)

N/A

Yes No

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Please Sign Here	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			
	<input checked="" type="checkbox"/>	Signature of officer	<i>Jacquelyn Miner</i>	Date
	<input checked="" type="checkbox"/>	Type or print name and title	<i>Jacquelyn Miner, CPA</i>	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's SSN or PTIN (See Gen. Inst. X)
	<i>JACQUELYN MINER, CPA</i>	<i>10/11/11</i>	<input checked="" type="checkbox"/>	
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		
	<i>2633 MEADOW GLEN PLACE SAN RAMON, CA 94583</i>	<input checked="" type="checkbox"/>		Phone no. 925-321-0661

Form 990 (2007)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Organization Exempt Under Section 501(c)(3)**(Except Private Foundation and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust)**Supplementary Information-(See separate instructions.)**

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

OMB No 1545-0047

2007

Name of the organization

ROCKET DOG RESUCE INC

Employer identification number

80 0000407

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 ► 0				
Part II-A 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 ► 0				
Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions)				
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation		
NONE				
Total number of other contractors receiving over \$50,000 for other services ► 0				

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.)		1	X
	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?		2a	X
b	Lending of money or other extension of credit?		2b	X
c	Furnishing of goods, services, or facilities?		2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		2d	X
e	Transfer of any part of its income or assets?		2e	X
3	a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		3a	X
b	Did the organization have a section 403(b) annuity plan for its employees?		3b	X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		3c	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		3d	X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		4a	X
b	Did the organization make any taxable distributions under section 4966?	N/A	4b	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	4c	
d	Enter the total number of donor advised funds owned at the end of the tax year		▷	N/A
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		▷	N/A
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		▷	0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year		▷	0.

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions)

I certify that 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations (See page 8 of the instructions.)

14 An organization organized and operated to test for public safety. Section 509(a)(4) (See page 8 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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)		174,385.				174,385.
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, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975						
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		174,385.	0.	0.	0.	174,385.
24 Line 23 minus line 17		174,385.				174,385.
25 Enter 1% of line 23		1,744.				
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	►	26a	N/A			
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 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts		26b	N/A			
c Total support for section 509(a)(1) test: Enter line 24, column (e)		26c	N/A			
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____		26d	N/A			
e Public support (line 26c minus line 26d total)		26e	N/A			
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	N/A %			
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: (2006) 0. (2005) 0. (2004) 0. (2003) 0.						
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 11b, 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: (2006) 0. (2005) 0. (2004) 0. (2003) 0.						
c Add: Amounts from column (e) for lines: 15 174,385. 16 _____ 17 _____ 20 _____ 21 _____		27c	174,385.			
d Add: Line 27a total 0. and line 27b total 0.		27d	0.			
e Public support (line 27c total minus line 27d total)		27e	174,385.			
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	►	27f	174,385.			
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27g	100.0000%			
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		27h	.0000%			
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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 9 of the instructions.)

N/A

(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?	29	
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?	30	
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.)	31	
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.)	32a 32b 32c 32d	
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.)	33a 33b 33c 33d 33e 33f 33g 33h	
34 a 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.	34a 34b	
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	35	

Schedule A (Form 990 or 990-EZ) 2007

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 11 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 ► if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	N/A
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 -	41	
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	41	
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			

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 13 of the instructions.)

(See instructions for lines 45 through 50 on page 18 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

N/A

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:

- 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.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations.** (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash
- (ii) Other assets

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

N/A

52. a. Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► Yes No

b If "Yes," complete the following schedule:

N/A

723152
12-27-07

FOOTNOTES

STATEMENT 1

THE RETURN IS BEING AMENDED TO CORRECT REVENUES AND EXPENSES PREVIOUSLY REPORTED. SPECIFICALLY, FORM 990 PART 1 - LINES 1B, 2, 4, 9A, AND 14.

THE ENDING BALANCE SHEET WAS ALSO CORRECTED AND A LOAN FOR THE PURCHASE OF AN AUTOMOBILE GUARANTEED BY THE TREASURER WAS ALSO DISCLOSED. ACCORDINGLY, PG 4 OF FORM 990 AND SCHEDULE A, PG 2, LINE 2B HAVE BEEN CORRECTED.

THE CORRECTING ENTRIES TO THE BALANCE SHEET, REVENUES AND EXPENSES ELIMINATED THE REPORTING OF OTHER CHANGES IN NET NET ASSETS, FORM 990 - LINE 20, PREVIOUSLY STATED.

LASTLY, SCHEDULE B WAS CREATED TO SHOW THE NAMES OF THE CONTRIBUTORS WHO HAVE DONATED \$5,000 OR MORE TO THE THE ORGANIZATION.

ROCKET DOG RESUCE INC

80-0000407

FORM 990	SPECIAL EVENTS AND ACTIVITIES	STATEMENT	2
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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
EVENT	29,586.		29,586.	3,370.	26,216.
TO FM 990, PART I, LINE 9	29,586.		29,586.	3,370.	26,216.

FORM 990	OTHER EXPENSES	STATEMENT	3
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING AND PROMOTIONAL GIFTS	5,389.		5,389.	
BANK FEES	898.		898.	
BOARDING	741.	741.		
INSURANCE	3,048.		3,048.	
TELEPHONE AND INTERNET EXPENSE	5,238.		5,238.	
MISCELLANEOUS	9,864.		9,864.	
VETERINARIAN	118,725.	118,725.		
VOLUNTER EXPENSE	3,679.	3,679.		
ADOPTION EXPENSE	7,675.	7,675.		
DOG TRANSPORTATION	7,443.	7,443.		
RESCUE FEES	4,272.	4,272.		
PROFESSIONAL FEES	800.		800.	
TOTAL TO FM 990, LN 43	167,772.	142,535.	25,237.	

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	4
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DESCRIPTION OF PROGRAM SERVICE ONE

ROCKET DOG IS DEDICATED TO SAVING HOMELESS AND ABANDONED ANIMALS FROM EUTHANASIA IN OVERCROWDED BAY AREA SHELTERS. RESCUED DOGS ARE SPAYED/NEUTERED, VACCINATED, TREATED FOR ANY MEDICAL OR BEHAVIORAL CONDITION AND THEN PLACED INTO TEMPORARY FOSTER HOMES WHERE THEY ARE SOCIALIZED PRIOR TO ADOPTION. THE ORGANIZATION THEN ACTIVELY SEEKS OUT PERMANENT QUALITY HOMES FOR THESE RESCUED DOGS THROUGH VOLUNTEER NETWORKS, ONLINE ADOPTION PAGES, WEEKEND ADOPTION FAIRS, AND NEIGHBORHOOD POSTER CAMPAIGNS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		163,438.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	5
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER	2,636.	1,371.	1,265.
FURNITURE	2,079.	865.	1,214.
HONDA ELEMENT	16,841.	3,060.	13,781.
TOTAL TO FORM 990, PART IV, LN 57	21,556.	5,296.	16,260.

FORM 990

EXPLANATION OF RELATIONSHIP
PART V-A, LINE 75B

STATEMENT 6

INDIVIDUAL'S NAME

TITLE OR ROLE

ILLEANA MARTINEZ

BOARD MEMBER

INDIVIDUAL'S NAME

TITLE OR ROLE

RAFAEL MARTINEZ

BOARD MEMBER

EXPLANATION OF RELATIONSHIP

ILLEANA & RAFAEL MARTINEZ ARE A MARRIED COUPLE.

SCHEDULE A	EXPLANATION OF TRANSACTIONS PART III, LINE 2B	STATEMENT	7
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THE TREASURER HAS AGREED TO PURCHASE ON BEHALF OF THE ORGANIZATION A HONDA ELEMENT TO BE USED STRICTLY BY THE ORGANIZATION FOR ITS' EXEMPT PURPOSE. CURRENTLY, THE TREASURER MAKES ALL PAYMENTS THROUGH HIS CREDIT UNION. THE ORGANIZATION HAS AGREED TO PAY BACK THE TREASURER ALL AMOUNTS PAID ON THEIR BEHALF FOR PURCHASE OF THIS VEHICLE.

Depreciation and Amortization 990
(Including Information on Listed Property)

2007

Attachment
Sequence No. 67

► See separate instructions. ► Attach to your tax return.

Business or activity to which this form relates

Identifying number

Name(s) shown on return

ROCKET DOG RESUCE INC

FORM 990 PAGE 2

80-0000407

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I		1	125,000.
1	Maximum amount See the instructions for a higher limit for certain businesses	2	
2	Total cost of section 179 property placed in service (see instructions)	3	
3	Threshold cost of section 179 property before reduction in limitation	4	
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	5	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions		

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7	Listed property. Enter the amount from line 29	7		
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9	Tentative deduction Enter the smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11		
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2008 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)	
14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year
15	Property subject to section 168(f)(1) election
16	Other depreciation (including ACRS)

Part III MACRS Depreciation (Do not include listed property.) (See instructions)	
Section A	
17	MACRS deductions for assets placed in service in tax years beginning before 2007
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ► <input type="checkbox"/>

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System							
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3 year property						
b	5 year property						
c	7-year property						
d	10-year property						
e	15 year property						
f	20 year property						
g	25 year property			25 yrs		S/L	
h	Residential rental property	/		27 5 yrs	MM	S/L	
		/		27 5 yrs	MM	S/L	
i	Nonresidential real property	/		39 yrs	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System						
20a	Class life					S/L
b	12-year			12 yrs		S/L
c	40-year	/		40 yrs	MM	S/L

Part IV Summary (see instructions)	
21	Listed property. Enter amount from line 28
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

716271
04-29-08 LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562-FY (2007)

Part V	Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)								
	Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable								

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	----------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use

25

26 Property used more than 50% in a qualified business use

HONDA ELEMENT	080107100.00 %	16,841.	16,841.5.00	200DB-HY	3,060.
	%				
	%				

27 Property used 50% or less in a qualified business use

%				S/L -	
%				S/L -	
%				S/L -	

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1

28

3,060.

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1

29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	31 Total commuting miles driven during the year	32 Total other personal (noncommuting) miles driven	33 Total miles driven during the year Add lines 30 through 32	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle	
				0						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?										
36 Is another vehicle available for personal use?										

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI	Amortization				
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage
42 Amortization of costs that begins during your 2007 tax year					

43 Amortization of costs that began before your 2007 tax year

43

44 Total. Add amounts in column (f). See the instructions for where to report

44