
Name:



Date: _____

Fill in the blanks with is or are



1. The cat _____ sleeping.



3. She ____ my friend.



4. The dogs ____running.



- 5. He ____ in the classroom.
- 6. The flowers _____ beautiful.



- 7. My bag _____ on the table.
- 8. We _____ happy.



- 9. The birds _____ flying.
- 10. This _____ my book.









