

**Friends of Ninos Adelante, Inc.**

P.O. Box 1624  
Sonoma, CA 95476-1624

July 27, 2011

Cyndi H. H. Nelson  
Registration Administrator, Charities  
State of Minnesota  
Office of the Attorney General  
Suite 1200  
445 Minnesota Street  
St. Paul, MN 55101-2130


Dear Ms. Nelson:

Enclosed is a copy of the 2010 Form 990-EZ for the year ended June 30, 2010, for Friends of Ninos Adelante, Inc. *Also enclosed is a copy of our Minnesota State Tax Annual Report*

Filing of our return slip between the cracks in our all volunteer, widely disbursed organization.

We trust that this will satisfy Minnesota's reporting requirements for the year ended June 30, 2010.

Thank you,



Ann Vander Ende, Treasurer

**STATE OF MINNESOTA  
CHARITABLE ORGANIZATION INITIAL REGISTRATION & ANNUAL REPORT FORM**

ATTORNEY GENERAL LORI SWANSON  
SUITE 1200, BREMER TOWER  
445 MINNESOTA STREET  
ST. PAUL, MN 55101-2130  
(651) 757-1311  
(651) 296-1410 (TTY)  
www.ag.state.mn.us

Annual Reporting  Initial Registration

FEDERAL EIN NUMBER: 41-1940075

FOR YEAR ENDING: June 30, 2010

**SECTION ONE: REQUIRED INFORMATION FOR INITIAL REGISTRATION & ANNUAL REPORTING**

1. Legal Name of Organization: Friends of Ninos Adelante Inc.

If annual reporting, is this a new name since the organization's last filing?  Yes  No

If so, please state former name: \_\_\_\_\_

2. List all names under which the organization solicits contributions:

Friends of Ninos Adelante INC  
Friends of Ninos Adelante

3. Mailing Address of Organization

PO Box 1624  
Sonoma, CA 95476

Physical Address of Organization

2500 Wellington Circle  
Minnetonka, MN 55391

4. Contact Person Bob Albright

Tel. No. 707 939 6778

E-mail bobalb@comcast.net

Fax No. \_\_\_\_\_

5. Complete the following for the most recent twelve-month accounting year. While this information should reflect the financials on the IRS Form 990, this section is required to be completed even if an IRS Form 990 is attached. Before completing this section, please refer to the Instructions.

**INCOME**

Contributions from the public  
Government Grants  
Other revenue

**TOTAL REVENUE**

For Year Ending: 6/30/2010

\$ 95,578  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ 95,578

**EXPENSES**

Amount spent for program or charitable purposes  
Management/general expense  
Fund-raising expense

**TOTAL EXPENSES**

\$ 60,000  
\$ 906  
\$ \_\_\_\_\_  
\$ 60,906

EXCESS or DEFICIT

\$ \_\_\_\_\_  
\$ 116,770  
\$ \_\_\_\_\_

TOTAL Assets

TOTAL Liabilities

END OF YEAR FUND BALANCE/NET WORTH (Assets minus Liabilities) \$ 116,770

For Office Use Only:  ARF  \$25  \$50  \$75  N (e-Postcard)  990  EZ  PF  FES  SIG  BD  
 SAL  Audit

STATE OF MINNESOTA  
 CHARITABLE ORGANIZATION FOR LIMITED LIABILITY COMPANIES

1. ORGANIZATION TYPE: LLC  
 2. TAX YEAR ENDING: JUNE 30, 2010

3. OFFICE ADDRESS:  
 4. CONTACT PERSON:  
 5. PHONE NUMBER:

6. NAME OF ORGANIZATION: Friends of Misses A. & J. ...  
 7. ADDRESS: ...

- 7. Does this professional fund-raiser solicit or consult in Minnesota?  Yes  No
- 8. Month and day accounting year ends: June 30
- 9. Has the organization included the filing fee, late fee (if any) and all attachments required by the instructions?  Yes  No

|                       |            |
|-----------------------|------------|
| 10. TOTAL ASSETS      | \$ 100,000 |
| 11. TOTAL LIABILITIES | \$ 0       |
| 12. NET ASSETS        | \$ 100,000 |
| 13. TOTAL REVENUE     | \$ 100,000 |
| 14. TOTAL EXPENSES    | \$ 0       |
| 15. NET REVENUE       | \$ 100,000 |
| 16. TOTAL ASSETS      | \$ 100,000 |
| 17. TOTAL LIABILITIES | \$ 0       |
| 18. NET ASSETS        | \$ 100,000 |

19. SIGNATURE OF OFFICER: \_\_\_\_\_  
 20. DATE: \_\_\_\_\_

**SECTION TWO: REQUIRED FOR INITIAL REGISTRATION ONLY**

1. Address of registered agent in the State of Minnesota or the address of the person who has custody of the organization's books and records if not kept at the organization's office.  
 Name \_\_\_\_\_  
 Street and Number \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_
  
2. Type of legal entity (Attach the creating document):  
 Nonprofit corporation       Trust       Unincorporated association
  
3. Place and date the organization was incorporated: \_\_\_\_\_  

(state)
(date)
  
4. Is the organization exempt from federal income taxes?  
 Yes (Attach a copy of the IRS determination letter)      Status: 501(c)(\_\_\_\_)  
 No      Date organization submitted Form 1023 to the IRS \_\_\_\_\_
  
5. If the organization is not exempt from federal income taxes and uses a fiscal agent, state the fiscal agent's name, address and federal EIN: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
6. Has the organization been denied the right to solicit contributions?  
 a. By any government agency?       Yes       No      If yes, attach explanation.  
 b. By any court?       Yes       No      If yes, attach explanation.
  
7. Explain in detail the charitable purposes of the organization, including major program activities.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  
8. Please mark all items that describe the organization's charitable mission:  
 Arts & Culture     Human Services     Civic/Lobbying     International     Health  
 Environment       Mental Health       Education       Religious       Other \_\_\_\_\_  
 Or: List the NTEE code(s) that describe the organization's purpose: \_\_\_\_\_
  
9. Which of the above two best describes the organization's primary purpose(s)?  
 1. \_\_\_\_\_ 2. \_\_\_\_\_
  
10. Check one or more methods of solicitation the organization anticipates using:  
 Telephone appeals     Grant writing       Sweep       Other \_\_\_\_\_  
 Direct mail       Internet       Media
  
11. State the total contributions the organization received during the accounting year last ended:  
 \$ \_\_\_\_\_
  
12. Attach a list of organization's officers, directors, trustees, and chief executive officer, including their titles, addresses, and total annual compensation paid to each.       Attached

**SECTION THREE: REQUIRED FOR ANNUAL REPORTING ONLY**

*ALL organizations MUST complete questions 1-6.*

1. Has the organization's accounting year changed since the last report was filed?  Yes  No  
If yes, provide the new year-end date: \_\_\_\_\_
  
2. Attach an explanation if there has been any change in the organization's tax status with the Internal Revenue Service; a significant change in the purposes of the organization; or if the organization's right to solicit funds has been denied, suspended, revoked or enjoined by any state agency or court in any state, or if there are proceedings pending.  None  Attached
  
3. List the five highest paid directors, officers and employees of the organization and its related organization(s) who receive total compensation of \$50,000 or more, indicating their titles and total compensation paid to each. Total compensation includes salaries, fees, bonuses, fringe benefits, severance payments and deferred compensation paid by the organization and all related organizations. A "related organization" is an organization that controls, is controlled by or is under common control with another corporation. "Control" can exist through stock ownership or membership interests, the authority to appoint members, or the ability to direct the policies and management of other corporations. See Minn. Stat. § 317A.011, subd. 18.

|   | Name/Title                          | Compensation |
|---|-------------------------------------|--------------|
| 1 | No director or officer is paid. The |              |
| 2 | organization has no employees       |              |
| 3 |                                     |              |
| 4 |                                     |              |
| 5 |                                     |              |

4. Attach a list of organization's board of directors.  Attached  
 Included in IRS Return
  
5. Attach a GAAP audit if total revenue exceeds \$750,000.  Attached  
 Audit not included under the Food Shelf Exemption (excluding from total revenue the value of food donated to a nonprofit food shelf for redistribution at no cost).  Audit not required
  
6. Minnesota law requires that an organization file a copy of any IRS Form 990-N (e-Postcard), 990, 990-EZ, or 990-PF informational return that was filed with the IRS. Has the organization included with this annual report a copy of all IRS Form 990-N (e-Postcard), 990, 990-EZ or 990-PF informational returns that it filed with the IRS (excluding Schedule B or any other donor list required by the IRS)?  
 Yes  No (Not required to file a return with IRS or files with National Chapter).

*NOTE: By answering YES to the above question, you are attesting that the IRS informational return filed with this office is an exact copy, including all schedules and attachments, of the IRS informational return filed with the IRS (excluding Schedule B or any other donor list the IRS may require).*

7. The following organizations must complete and return the statement of functional expenses below:  
 1) organizations that file a 990-N (e-Postcard), 990-EZ, or 990-PF; and 2) organizations that file an IRS Form 990 that does not contain a completed functional expenses statement within the IRS Form 990.

| Statement of Functional Expenses  |                       |                                 |  |                             |
|---|-----------------------|---------------------------------|--|-----------------------------|
|   | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
| 1 Grants and other assistance to governments and organizations in the U.S.  |                       |                                 |  |                             |
| 2 Grants and other assistance to individuals in the U.S.  |                       |                                 |  |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S.   | 60,000                | 60,000                          |  |                             |
| 4 Benefits paid to or for members   |                       |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees  |                       |                                 |  |                             |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))   |                       |                                 |  |                             |
| 7 Other salaries and wages  |                       |                                 |  |                             |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)   |                       |                                 |  |                             |
| 9 Other employee benefits   |                       |                                 |  |                             |
| 10 Payroll taxes  |                       |                                 |  |                             |
| 11 Fees for services (non-employees):   |                       |                                 |  |                             |
| a Management  |                       |                                 |  |                             |
| b Legal   |                       |                                 |  |                             |
| c Accounting  |                       |                                 |  |                             |
| d Lobbying  |                       |                                 |  |                             |
| e Professional fundraising services   |                       |                                 |  |                             |
| f Investment management fees  |                       |                                 |  |                             |
| g Other <i>Bank fees</i>  |                       |                                 | 796                                    |                             |
| 12 Advertising and promotion  |                       |                                 |  |                             |
| 13 Office expenses  |                       |                                 | 60                                     |                             |
| 14 Information technology   |                       |                                 | 50                                     |                             |
| 15 Royalties  |                       |                                 |  |                             |
| 16 Occupancy  |                       |                                 |  |                             |
| 17 Travel   |                       |                                 |  |                             |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings   |                       |                                 |  |                             |
| 20 Interest   |                       |                                 |  |                             |
| 21 Payments to affiliates   |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization  |                       |                                 |  |                             |
| 23 Insurance  |                       |                                 |  |                             |
| 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)  |                       |                                 |  |                             |
| a .....   |                       |                                 |  |                             |
| b .....   |                       |                                 |  |                             |
| c .....   |                       |                                 |  |                             |
| d All other expenses  |                       |                                 |  |                             |
| 25 Total functional expenses. Add lines 1 through 24d   | 60,906                | 60,000                          | 906                                    |                             |
| 26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       |                                 |  |                             |

Must be prepared in accordance with generally accepted accounting principles.

**SECTION FOUR: REQUIRED FOR INITIAL REGISTRATION & ANNUAL REPORTING**

**BOARD OF DIRECTORS  
SIGNATURES AND ACKNOWLEDGMENT**

We, the undersigned, state and acknowledge that we are duly constituted officers of this organization, being the Treasurer (Title) and Secretary (Title) respectively, and that we execute this document on behalf of the organization pursuant to the resolution of the Board of Directors (Board of Directors, Trustees, or Managing Group) adopted on the 27 day of July, 2011, approving the contents of the document, and do hereby certify that the Board of Directors (Board of Directors, Trustees or Managing Group) has assumed, and will continue to assume, responsibility for determining matters of policy, and have supervised, and will continue to supervise, the finances of the organization. We further state that the information supplied is true, correct and complete to the best of our knowledge.

Ann Vander Ende  
Name (Print)  
  
\_\_\_\_\_  
Signature  
Treasurer  
Title  
  
\_\_\_\_\_  
Date

Janie Robins  
Name (Print)  
  
\_\_\_\_\_  
Signature  
Secretary  
Title  
  
7/27/11  
Date

**\* NOTICE \***

Documents required to be filed are public records. Please do not include social security numbers, driver's license numbers or bank account numbers on the documents filed with this Office as they are not required, but could become part of the public records. A charitable organization is not required to file a list of its donors. If it is included, it may become part of the public file.