DAO T NGUYEN CPA
10869 YELLOW PINE ST NW
COON RAPIDS, MN 55433
OFFICE (763) 757-7685
FAX (763) 201-3344
EMAIL: daonguyencpa@comcast.net

ACCOUNTANT'S COMPILATION REPORT

To the Board of Trustees of
Bridges To Learning, Inc.
Minneapolis, Minnesota

I have compiled the accompanying statement of financial position of Bridges To Learning Inc. (a nonprofit organization) as of December 31, 2012, statement of activities, and the related statement of functional expenses for the year then ended. I have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with the accounting principles generally accepted in the United States of America.

Management is responsible for the preparation and fair presentation of the financial statements in accordance the accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and far presentation of the financial statements.

My responsibility is to conduct the compilation in accordance with the Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Management has elected to omit substantially all of the disclosures required by accounting principles generally accepted in the United States of America. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the Organization's financial position, changes in net assets, and cash flows. Accordingly, these financial statements are not designed for those who are not informed about such matters.

I am not independent with respect to Bridges To Learning, Inc as of and for the period ended December 31, 2012 because I performed payroll and tax compliance services that impaired my independence.

Dao T Nguyen, CPA

May 3rd, 2013
Report Date

BRIDGES TO LEARNING, INC.
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2012

	Unrestricted	Temporary Restricted	Total
Revenues and Support			
Contributions and Grants			
Contributions	122,915	-	122,915
Sales	1,236	-	1,236
Total Contributions	124,151	-	124,151
Investment Income	7	-	7
Net Assets released from restrictions	-	-	-
Total Revenue and Support	124,158	-	124,158
Expenses			
Program Services			
Direct Assistance			
Children's Breakfast Fund	9,207	-	9,207
Sponsors	74,975	-	74,975
Key Chain Sales	893		893
Others	-	-	-
	85,075	-	85,075
Bank Charges/Credit Card fees	2,419	-	2,419
Business Insurance	455	-	455
Business License	20	-	20
Dues & Subscription	616	-	616
Meals & Entertainment	192	-	192
Office Supplies	580	-	580
Postage	198		198
Printing	450	-	450
Travel	1,705		1,705
Web Maintenance	1,920	-	1,920
Total Program Services	93,630	-	93,630
Supporting Services			
Fund-Raising	26,315	-	26,315
Management and General	3,992	-	3,992
Total Expenses	123,937	-	123,937
Change in net Assets (Deficit)	221	-	221
Nets Assets, Beginning of the Year	40,436	-	40,436
Nets Assets, End of the Year	40,657	-	40,657

BRIDGES TO LEARNING, INC.
STATEMENT OF FINANCIAL POSITION
DECEMBER 31, 2012

ASSETS

Current Assets		
Cash - Operations	$	39,781
Cash - Savings	$	6,511
Accounts Receivable	$	-
Total Current Assets		46,292
Restricted Assets		
Investments (Money Market Funds)	$	-
Fixed Assets		
Equipment (Less Accumulated Depreciation)	$	-
Total Assets	$	46,292

LIABILITIES AND NET ASSETS

Current Liabilities		
Accounts Payable	$	-
Accrued Payroll Taxes Payable	$	959
Wells Fargo CC Payable	$	137
Other Current Liabilities	$	4,539
Total Current Liabilities		5,635
Net Assets		
Unrestricted	$	40,657
Temporary Restricted	$	-
Total Net Assets	$	40,657
Total Liabilities and Net Assets	$	46,292

SEE ACCOUNTANT'S COMPILATION REPORT

BRIDGES TO LEARNING, INC.
Statement of Functional Expenses
Year Ended December 31, 2012

	Program Services						Support Services			
	Building Schools	Student & Educational Support	Research & Dissemination	Collaboration & Partnerships	School Asset Mgmt	Total Program Services	Fundraising	Management and General	Total Support Services	Total
Children's Breakfast Fund	0	6,650	0	0	0	6,650	0	0	0	6,650
Sponsors	0	54,150	0	0	0	54,150	0	0	0	54,150
Key Chains/Moon Festival	0	893	0	0	0	893	0	0	0	893
Salaries	1,250	12,500	2,500	2,500	1,250	20,000	2,500	2,500	5,000	25,000
Wages - Others	60	598	120	120	60	957	120	120	239	1,197
Payroll Taxes	152	1,515	303	303	152	2,425	303	303	606	3,031
Bank Charges	151	1,512	302	302	151	2,418	302	302	605	3,023
Business Insurance	28	285	57	57	28	455	57	57	114	569
Business License	1	13	3	3	1	20	3	3	5	25
Dues & Subscription	39	385	77	77	39	616	77	77	154	770
Meals & Entertainment	12	120	24	24	12	192	24	24	48	240
Office Supplies	36	363	73	73	36	580	73	73	145	725
Postage	12	124	25	25	12	198	25	25	50	248
Printing	28	282	56	56	28	450	56	56	113	563
Travel	107	1,066	213	213	107	1,705	213	213	426	2,131
Web Maintenance	120	1,200	240	240	120	1,920	240	240	480	2,400
Fundraising	0	0	0	0	0	0	22,323	0	22,323	22,323
Total	**1,996**	**81,654**	**3,992**	**3,992**	**1,996**	**93,630**	**26,315**	**3,992**	**30,307**	**123,937**

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

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)

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than $200,000 and total assets less than $500,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning , 2012, and ending , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
BRIDGES TO LEARNING INC

Number and street (or P.O. box, if mail is not delivered to street address) | Room/suite
1633 CEDAR LAKE PARKWAY

City or town, state or country, and ZIP + 4
MINNEAPOLIS, MN 55416

D Employer identification number
20-1698868

E Telephone number
(612)381-1990

F Group Exemption Number ▶

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

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

I Website: ▶ www.bridges2learning.org

J Tax-exempt status (check only one) - ☒ 501(c)(3) ☐ 501(c)( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization or section 527 organization and its gross receipts are normally not more than $50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, line 25, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 124,158

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	58,079
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	7
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b	64,836	
	c	Less: direct expenses from gaming and fundraising events	6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	64,836
	7a	Gross sales of inventory, less returns and allowances	7a	1,236	
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	1,236
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	124,158
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	648
	16	Other expenses (describe in Schedule O)		16	123,289
	17	**Total expenses.** Add lines 10 through 16 ▶		17	123,937
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	221
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	40,436
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	40,657

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☒

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	38,390	22	46,292
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	3,125	24	0
25 **Total assets**	41,515	25	46,292
26 **Total liabilities** (describe in Schedule O)	1,079	26	5,635
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	40,436	27	40,657

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . . . . ☐

What is the organization's primary exempt purpose? To provide resources for VN children

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 Our primary program provides for the student's education and welfare. We transfer donations from private citizens to support indigent children in Vietnam to attend free school.

(Grants $) If this amount includes foreign grants, check here . . . . . ▶ ☐ 28a 74,975

29 We established the Breakfast fund as a means to provide the elementary school children a nutritious breakfast each morning.

(Grants $) If this amount includes foreign grants, check here . . . . . ▶ ☐ 29a 9,207

30 Other expenses directly associated with program services

(Grants $) If this amount includes foreign grants, check here . . . . . ▶ ☐ 30a 8,555

31 Other program services (describe in Schedule O)

(Grants $) If this amount includes foreign grants, check here . . . . . ▶ ☐ 31a

32 **Total program service expenses** (add lines 28a through 31a) . . . . . ▶ 32 92,737

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV . . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JERILYN H HIRSCH FOUNDER	12	0	0	0
ROBERT A MAC MURDO TREASURER	12	0	0	0
DEBRA HAYS SECRETARY	6	0	0	0
DAVID LECKEY CHAIRMAN	2	0	0	0
MARGARET THOMAS EXECUTIVE DIRECTOR	20	25,000	0	0
TONG PHAM VICE CHAIRMAN	2	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		X
35 a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38 a	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 outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 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			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____			
b	Section 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 engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ MN			
42 a	The organization's books are in care of ▶ ROBERT A MAC MURDO Telephone no. ▶ 612-381-1990 Located at ▶ 1633 CEDAR LAKE PARKWAY MINNEAPOLIS, MN ZIP + 4 ▶ 55416			
b	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: ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**-Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		X

			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		X

Part VI Section 501(c)(3) organizations only

All Section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than $100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over $100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 ▶

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ ☒ Yes ☐ No

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.

Sign Here

ROBERT MAC MURDO
Signature of officer — Date

ROBERT MAC MURDO, TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ — Firm's EIN ▶

Firm's address ▶ — Phone no.

May the IRS discuss this return with the preparer shown above? See Instructions ▶ ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization	Employer identification number
BRIDGES TO LEARNING INC	20-1698868

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☒ 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 exempt 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).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III-Non-funtionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 %

15 Public support percentage from 2011 Schedule A, Part II, line 14 . . . . . 15 %

16a **33 1/3% support test - 2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33 1/3% support test - 2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test - 2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test - 2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	115,277	95,762	99,202	128,048	58,079	496,368
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus. under sec 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	115,277	95,762	99,202	128,048	58,079	496,368
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						496,368

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	115,277	95,762	99,202	128,048	58,079	496,368
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	827	50	49	28	7	961
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	827	50	49	28	7	961
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	116,104	95,812	99,251	128,076	58,086	497,329

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	99.81 %
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	0.19 %
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests - 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047
2012
Open to Public Inspection

Name of the organization
BRIDGES TO LEARNING INC

Employer identification number
20-1698868

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☒ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 TICKET SALES (event type)	(b) Event #2 APPEALS (event type)	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	22,250	42,586		64,836
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	22,250	42,586		64,836
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				( )
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				64,836

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

BRIDGES TO LEARNING INC

Employer identification number

20-1698868

01. Description of other expenses (Part I, line 16)

Description	Amount
Children Education fund	74,975
Children Breakfast fund	9,207
Business License	20
Dues and Subscription	616
Meals and Entertainment	192
Office Expense	580
Bank fees	2,419
Insurance	455
Travel	1,705
Web Maintenance	1,920
Fundraising Expenses	26,315
Management and General Expenses	3,992
Key Chain Sales	893

02. Description of other assets (Part II, line 24)

Category	Beginning of Year	End of Year
Accounts Receivable	3,125	0

03. Description of total liabilities (Part II, line 26)

Category	Beginning of Year	End of Year
Acounts Payable	0	4,539
Credit Cards Payable	4	137
Payroll Taxes Payable	1,075	959

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: 20-1698868

FOR YEAR ENDING: DECEMBER 31, 2012

SECTION A: REQUIRED INFORMATION FOR INITIAL REGISTRATION & ANNUAL REPORTING

1. *Legal Name of Organization:* BRIDGES TO LEARNING, 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:

   _____

   _____

3. *Mailing Address of Organization (required)*
   1633 CEDAR LAKE PARKWAY
   MINNEAPOLIS, MN 55416

   Physical Address of Organization (required)
   SAME AS MAILING ADDRESS

4. *Contact Person* ROBERT MAC MURDO
   Tel. No. (612) 381-1990
   E-mail _____
   Fax No. _____

5. Does the organization use the services of a professional fund-raiser (outside solicitor or consultant)?
   ☐ Yes ☒ No

   If so, provide name and address of any outside professional fund-raiser employed by the organization and state the total amount of compensation each outside fund-raiser received from the filing organization during the year. ***Attach schedule if more than one.***

   Name _____
   Address _____
   City _____ State _____ Zip _____ Compensation _____

6. a) Does this professional fund-raiser solicit or consult in Minnesota? ☐ Yes ☒ No

   b) Is this professional fund-raiser registered to solicit or consult in Minnesota? ☐ Yes ☐ No

7. Month and day accounting year ends: 12/31

8. Has the organization included the filing fee, late fee (if any) and all attachments required by the instructions? ☒ Yes ☐ No

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

Upon request this material can be made available in alternate formats.

9. This Section A(9) must be completed by organizations filing a 990-N (e-Postcard) or organizations whose filing does not contain the information requested below. This includes organizations that: 1) do not file an IRS Form 990, 2) file an IRS Form 990-EZ or 990-PF, or 3) organizations that file a group return that does not include the filing organization's individual financial information.

INCOME

Contributions from the public	$ 122,915.00
Government Grants	$
Other revenue	$ 1,243.00
TOTAL REVENUE	$ 124,158.00

EXCESS or DEFICIT	$ 221.00
TOTAL Assets	$ 46,292.00
TOTAL Liabilities	$ 5,635.00

END OF YEAR FUND BALANCE/NET WORTH (Assets minus Liabilities) $ 40,657.00

SECTION B: 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 ☐ Other _____

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 ☐ Sweepstakes ☐ 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 C: REQUIRED FOR ANNUAL REPORTING ONLY

ALL Annual Report filers 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 of the five highest paid directors, officers, and employees of the organization and its related organizations, as that term is defined by section 317A.011, subdivision 18, that receive total compensation of more than $100,000, together with the compensation paid to each. For purposes of this subdivision, "compensation" is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. The value of fringe benefits and deferred compensation paid by the charitable organization and all related organizations as that term is defined by section 317A.011, subdivision 18, shall also be reported as a separate item for each person whose compensation is required to be reported pursuant to this subdivision.

	Name/Title	Compensation	Deferred Compensation	Fringe Benefits
1	NONE			
2				
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 all tax or informational returns filed with the IRS, including IRS Form 990-N (e-Postcard), 990, 990-EZ, or 990-PF, including all schedules and amendments. Has the organization included with this annual report a copy of all tax or informational returns, including IRS Form 990-N (e-Postcard), 990, 990-EZ or 990-PF that it filed with the IRS (excluding Schedule B or any other donor list)? ☒ Yes ☐ No (Not required to file a return with IRS or files a group return).

   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. This Section C(7) must be completed by organizations that: 1) do not file an informational return with the IRS; 2) file a 990-N (e-Postcard), 990-EZ, or 990-PF; 3) file a group return that does not include the filing organization's functional expense information; or 4) file an IRS Form 990 that does not contain a completed functional expenses statement within the IRS Form 990.

Statement of Functional Expenses				
	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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.	$ 61,693.00	$ 61,693.00		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	$ 25,000.00	$ 20,000.00	$ 2,500.00	$ 2,500.00
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	$ 1,197.00	$ 957.00	$ 120.00	$ 120.00
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	$ 3,031.00	$ 2,425.00	$ 303.00	$ 303.00
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	$ 725.00	$ 580.00	$ 73.00	$ 73.00
14 Information technology	$ 2,400.00	$ 1,920.00	$ 240.00	$ 240.00
15 Royalties				
16 Occupancy				
17 Travel	$ 2,131.00	$ 1,705.00	$ 213.00	$ 213.00
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	$ 569.00	$ 455.00	$ 57.00	$ 57.00
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 Bank and Credit Card Fees	$ 3,023.00	$ 2,418.00	$ 302.00	$ 302.00
b Miscellaneous Others	$ 1,845.00	$ 1,477.00	$ 184.00	$ 184.00
c Fundraising	$ 22,323.00			$ 22,323.00
d All other expenses				
25 **Total functional expenses.** Add lines 1 through 24d	$ 123,937.00	$ 93,630.00	$ 3,992.00	$ 26,315.00
26 **Joint costs.** Check here ▶ ☐ 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.

For 990-EZ filers: Column A, Line 25 should equal line 17 IRS Form 990-EZ

For 990-PF filers: Column A, Line 25 should equal line 26 IRS Form 990-PF

The total of Column A, lines 1 through 24d should equal line 25a.

The total of lines 25b, 25c and 25d , should equal line 25a

SECTION D: 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 _____(Title) and _____(Title) respectively, and that we execute this document on behalf of the organization pursuant to the resolution of the _____(Board of Directors, Trustees, or Managing Group) adopted on the _____ day of _____, 20____, approving the contents of the document, and do hereby certify that the _____(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.

_____	_____
Name (Print)	Name (Print)
_____	_____
Signature	Signature
_____	_____
Title	Title
_____	_____
Date	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.

AG: #3124563-v1

BRIDGES TO LEARNING, INC.
1633 CEDAR LAKE PARKWAY
MINNEAPOLIS, MN 55416
TEL. (612) 381-1990

BOARD OF DIRECTORS - 2012

CHAIRMAN	David Leckey 1633 Cedar Lake Parkway Minneapolis, MN 55416
VICE CHAIRMAN	Tong Pham 1633 Cedar Lake Parkway Minneapolis, MN 55416
TREASURER	Robert A Mac Murdo 1633 Cedar Lake Parkway Minneapolis, MN 55416
SECRETARY	Debra Hays 1633 Cedar Lake Parkway Minneapolis, MN 55416
FOUNDER	Jerilyn J. Hirsch 1633 Cedar Lake Parkway Minneapolis, MN 55416
BOARD MEMBER	D. Andrew Brown 1633 Cedar Lake Parkway Minneapolis, MN 55416
BOARD MEMBER	Becca Pryse 1633 Cedar Lake Parkway Minneapolis, MN 55416
BOARD MEMBER	John Johnson 1633 Cedar Lake Parkway Minneapolis, MN 55416
BOARD MEMBER	Kathy Wilhoit 1633 Cedar Lake Parkway Minneapolis, MN 55416
BOARD MEMBER	Liem Nguyen 1633 Cedar Lake Parkway Minneapolis, MN 55416
EXECUTIVE DIRECTOR	Margaret Thomas 1633 Cedar Lake Parkway Minneapolis, MN 55416