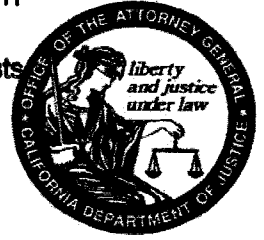


RECEIVED
Attorney General's Office

APR 20 2011



Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEBSITE ADDRESS:

<http://ag.ca.gov/charities/>

**INITIAL
REGISTRATION FORM**
Registry of Charitable Trusts
STATE OF CALIFORNIA
OFFICE OF THE ATTORNEY GENERAL
REGISTRY OF CHARITABLE TRUSTS
(Government Code Sections 12580-12599.7)

NOTE: A \$25.00 REGISTRATION FEE MUST ACCOMPANY THIS REGISTRATION FORM. MAKE CHECKS PAYABLE TO DEPARTMENT OF JUSTICE.

Pursuant to Section 12585, registration is required of every trustee subject to the Supervision of Trustees and Fundraisers for Charitable Purposes Act within thirty days after receipt of assets (cash or other forms of property) for the charitable purposes for which organized.

Every charitable (public benefit) corporation, association and trustee holding assets for charitable purposes or doing business in the State of California must register with the Attorney General, except those exempted by California Government Code section 12583. Corporations that are organized primarily as a hospital, a school, or a religious organization are exempted by Section 12583.

Name of Organization: Mr. Mom Non-Profit Organization

Official Mailing Address for Organization:

Address: 1807 Santa Rita Road D102

City: Pleasanton

State: Ca

ZIP Code: 94566

Organization's telephone number: 877-996-7666

Organization's e-mail address: mrmomnpo@yahoo.com

Organization's fax number: N/A

Organization's website: www.mrmomnpo.org

Federal Employer Identification Number (FEIN):

26-3311927

Group Exemption FEIN (if applicable):

Corporate or Organization Number:

3278691

Names and addresses of ALL trustees or directors and officers (attach a list if necessary):		
Name Maurice Moore	Position board of directors	
Address 6609 Forget Me Not Common		
City Livermore	State Ca	ZIP Code 94551
Name Denise Dinsmore	Position co-founder	
Address 1989A Santa Rita Rd #102		
City Pleasanton	State Ca	ZIP Code 94566
Name Vernia Smith	Position board of directors	
Address 9017 Chantal Wy		
City Elk Grove	State Ca	ZIP Code 95829
Name	Position	
Address		
City	State	ZIP Code
Name	Position	
Address		
City	State	ZIP Code
Describe the primary activity of the organization. (A copy of the material submitted with the application for federal or state tax exemption will normally provide this information.) If the organization is based outside California, comment fully on the extent of activities in California and how the California activities relate to total activities. In addition, list all funds, property, and other assets held or expected to be held in California. Indicate whether you are monitored in your home state, and if so, by whom. Attach additional sheets if necessary.		
Fund-raising for underprivileged youth.		
<p>The organization will be required to file financial statements with the California State Board of Accountancy. If the organization is based outside California, comment fully on the extent of activities in California and how the California activities relate to total activities. In addition, list all funds, property, and other assets held or expected to be held in California. Indicate whether you are monitored in your home state, and if so, by whom. Attach additional sheets if necessary.</p>		
If assets (funds, property, etc.) have been received, enter the date first received:		<p>REGISTRATION FEE: \$100.00 STATE FEE: \$100.00 TOTAL: \$200.00</p>
Date assets first received: <u>April 15, 2008</u>		
What annual accounting period has the organization adopted?		
<input type="checkbox"/> Fiscal Year Ending _____ <input checked="" type="checkbox"/> Calendar Year		

Attach your founding documents as follows: Corporation

- A) **Corporations** - Furnish a copy of the articles of incorporation and all amendments and current bylaws. If incorporated outside California, enter the date the corporation qualified through the California Secretary of State's Office to conduct activities in California.
- B) **Associations** - Furnish a copy of the instrument creating the organization (bylaws, constitution, and/or articles of association).
- C) **Trusts** - Furnish a copy of the trust instrument or will and decree of final distribution.
- D) **Trustees for charitable purposes** - Furnish a statement describing your operations and charitable purpose.

Has the organization applied for or been granted IRS tax exempt status Yes No

Date of application for Federal tax exemption: _____

Date of exemption letter: _____ Exempt under Internal Revenue Code section 501(c) _____

If known, are contributions to the organization tax deductible? Yes No

Attach a copy of the Application for Recognition of Exemption (IRS Form 1023) and the determination letter issued by the IRS.

Does your organization contract with or otherwise engage the services of any commercial fundraiser for charitable purposes, fundraising counsel, or commercial coventurer? If yes, provide the name(s), address(es), and telephone number(s) of the provider(s):

Commercial Fundraiser Fundraising Counsel Commercial Coventurer

Name

Address

City State ZIP Code

Telephone Number

Commercial Fundraiser Fundraising Counsel Commercial Coventurer

Name

Address

City State ZIP Code

Telephone Number

Commercial Fundraiser Fundraising Counsel Commercial Coventurer


Name

Address

City State ZIP Code

Telephone Number

I declare under penalty of perjury that I have examined this registration form, including accompanying documents, and to the best of my knowledge and belief, the form and each document are true, correct, and complete.

Signature 

Title co-founder

Date 4/17/2011