

2011

# California Exempt Organization Annual Information Return

199

Calendar Year 2011 or fiscal year beginning month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_, and ending month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_.

Corporation/Organization Name

Friends for Fragile X

California corporation number

Address (suite, room, or PMB no.)

P O Box 503846

FEIN

2 7 3 8 7 7 5 1 8

City

San Diego

State

CA

ZIP Code

92150

A First Return. ☐ Yes ☒ NoB Amended Return. ☒ Yes ☐ NoC IRC Section 4947(a)(1) trust ☐ Yes ☒ NoD Final Return ☐ Yes ☒ No
☐ Dissolved ☐ Surrendered (Withdrawn)

☐ Merged/Reorganized Enter date: ☐ \_\_\_\_ / \_\_\_\_ / \_\_\_\_

E Check accounting method:

(1) ☐ Cash (2) ☐ Accrual (3) ☐ Other

F Federal return filed?

(1) ☐ 990T (2) ☐ 990(PF) (3) ☒ Sch H (990)G Is this a group filing for the subordinates/affiliates? ☐ Yes ☒ No

If "Yes," attach a roster. See instructions

H Is this organization in a group exemption? ☐ Yes ☒ No

If "Yes," what is the parent's name?

I Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? ☐ Yes ☒ No

If "Yes," explain, and attach copies of revised documents.

J If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? ☐ Yes ☒ No

If "Yes," complete and attach form FTB 3509.

K Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ No

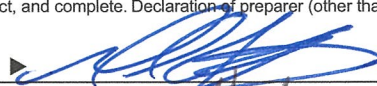
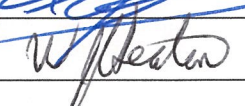
If "Yes," enter the gross receipts from nonmember sources. \$ \_\_\_\_\_

L If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. No filing fee is required. ☐ ☐

M Is the organization a Limited Liability Company? ☐ Yes ☒ NoN Did the organization file Form 100 or Form 109 to report taxable income? ☐ Yes ☒ NoO Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ No

## Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8.	1		00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received.	3	56,320	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3.			
	This line must be completed. If the result is less than \$25,000, see General Instruction B.				
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6.	7		00
Expenses	8	Total gross income. Subtract line 7 from line 4.	8	56,320	00
	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	33,289	00
Filing Fee	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	23,032	00
	11	Filing fee \$10 or \$25. See General Instruction F	11	10	00
	12	Total payments	12	0	00
	13	Penalties and Interest. See General Instruction J	13	0	00
	14	Use tax. See General Instruction K	14	0	00
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	10	00

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 taxpayer) is based on all information of which preparer has any knowledge.		Telephone ( 858 ) 218-5347
	Signature of officer 	Title Co-Chairman	
Paid Preparer's Use Only	Date 5/9/12	Check if self-employed <input type="checkbox"/>	PTIN P 1 0 2 5 6 4 0 6
	Preparer's signature 	Date 5/9/12	FEIN 2 3 6 6 2 3 4 0 3
	Firm's name (or yours, if self-employed) and address Heaton & Associates 13430 The Square, Poway, CA 92064-1309		Telephone ( 818 ) 802-2404
May the FTB discuss this return with the preparer shown above? See instructions <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information. See Specific Line Instructions.**

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions . . . . .	●	1		00
	2	Interest. . . . .	●	2		00
	3	Dividends . . . . .	●	3		00
	4	Gross rents . . . . .	●	4		00
	5	Gross royalties. . . . .	●	5		00
	6	Gross amount received from sale of assets (See Instructions) . . . . .	●	6		00
	7	Other income. Attach schedule . . . . .	●	7		00
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1. . . . .		8		00
<b>Expenses and Disbursements</b>	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule . . . . .	●	9	56,320	00
	10	Disbursements to or for members . . . . .	●	10		00
	11	Compensation of officers, directors, and trustees. Attach schedule. . . . .	●	11		00
	12	Other salaries and wages . . . . .	●	12		00
	13	Interest. . . . .	●	13		00
	14	Taxes . . . . .	●	14		00
	15	Rents . . . . .	●	15		00
	16	Depreciation and depletion (See instructions) . . . . .	●	16		00
	17	Other Expenses and Disbursements. Attach schedule. . . . .	●	17	33,289	00
	18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9. . . . .		18	33,289	00

<b>Schedule L Balance Sheets</b>		<b>Beginning of taxable year</b>		<b>End of taxable year</b>	
		(a)	(b)	(c)	(d)
<b>Assets</b>					
1	Cash . . . . .		9,954	●	23,747
2	Net accounts receivable . . . . .			●	
3	Net notes receivable. . . . .			●	
4	Inventories . . . . .			●	
5	Federal and state government obligations. . . . .			●	
6	Investments in other bonds. . . . .			●	
7	Investments in stock. . . . .			●	
8	Mortgage loans . . . . .			●	
9	Other investments. Attach schedule . . . . .			●	
10	<b>a</b> Depreciable assets . . . . .				
	<b>b</b> Less accumulated depreciation . . . . .	( )	( )		
11	Land . . . . .			●	
12	Other assets. Attach schedule . . . . .		2,994	●	4,643
13	<b>Total assets</b> . . . . .		12,948		28,390
<b>Liabilities and net worth</b>					
14	Accounts payable . . . . .			●	
15	Contributions, gifts, or grants payable . . . . .			●	
16	Bonds and notes payable. . . . .			●	
17	Mortgages payable . . . . .			●	
18	Other liabilities. Attach schedule . . . . .		7,590		
19	Capital stock or principle fund. . . . .			●	
20	Paid-in or capital surplus. Attach reconciliation . . . . .			●	
21	Retained earnings or income fund . . . . .		5,358	●	28,390
22	<b>Total liabilities and net worth.</b> . . . . .		12,948		28,390

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1	Net income per books . . . . .	●	23,032	7	Income recorded on books this year not included in this return. Attach schedule . . . . .	●	
2	Federal income tax . . . . .	●		8	Deductions in this return not charged against book income this year. Attach schedule . . . . .	●	
3	Excess of capital losses over capital gains . . . . .	●		9	<b>Total.</b> Add line 7 and line 8 . . . . .		0
4	Income not recorded on books this year. Attach schedule . . . . .	●		10	<b>Net income per return.</b> Subtract line 9 from line 6 . . . . .		23,032
5	Expenses recorded on books this year not deducted in this return. Attach schedule . . . . .	●					
6	<b>Total.</b> Add line 1 through line 5 . . . . .		23,032				

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

**273877518**

OMB No. 1545-0047

2011

## Open to Public Inspection

**Total = \$4,643.**