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Short Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No 1545-1150

2009

Open to Public
Inspection

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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.

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

B Check if applicable

- Address change
- Name change
- Initial return
- Termination
- Amended return
- Application pending

Please use IRS
label or
print or
type.
See
Specific
Instruc-
tions.

C Name of organization
MINNESOTA ASSOCIATION FOR VOLUNTEER ADMINISTRATION
Number and street (or P O box, if mail is not delivered to street address) Room/suite
1800 WHITE BEAR AVE NORTH **130**
City or town, state or country, and ZIP + 4
MAPLEWOOD **MN 55109**

D Employer identification number

41-1463366

E Telephone number

(651) 482-7690F Group Exemption
Number

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts
must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method: Cash Accrual
Other (specify) ▶

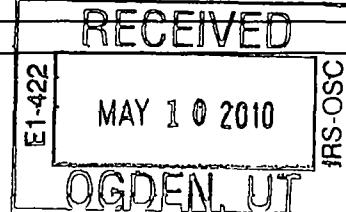
I Website: ▶ www.mavanetwork.orgJ Tax-exempt status (check only one) — 501(c) (3) ▶ (insert no.) 4947(a)(1) or 527K Check ▶ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ

▶ \$ **233,038.**

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

1 Contributions, gifts, grants, and similar amounts received	1	90,996.
2 Program service revenue including government fees and contracts	2	110,421.
3 Membership dues and assessments	3	25,852.
4 Investment income	4	1,427.
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 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here		▶ <input type="checkbox"/>
a Gross revenue (not including \$ 4,342. of contributions reported on line 1)	6a	4,342.
b Less: direct expenses other than fundraising expenses	6b	0.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	4,342.
7a Gross sales of inventory, less returns and allowances	7a	
b Less: cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe ▶	8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	233,038.
10 Grants and similar amounts paid (attach schedule)	10	
11 Benefits paid to or for members	11	
12 Salaries, other compensation, and employee benefits	12	63,440.
13 Professional fees and other payments to independent contractors	13	23,023.
14 Occupancy, rent, utilities, and maintenance	14	7,196.
15 Printing, publications, postage, and shipping	15	1,489.
16 Other expenses (describe ▶ See Other Expenses Statement)	16	127,665.
17 Total expenses. Add lines 10 through 16	17	222,813.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	10,225.
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	168,874.
20 Other changes in net assets or fund balances (attach explanation)	20	
21 Net assets or fund balances at end of year Combine lines 18 through 20	21	179,099.



Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	155,744.22	180,975.
23 Land and buildings	0.23	0.
24 Other assets (describe ▶ See L-24 Stmt)	15,000.24	0.
25 Total assets	170,744.25	180,975.
26 Total liabilities (describe ▶ See L-26 Stmt)	1,870.26	1,876.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	168,874.27	179,099.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part V. Other Information (Note the statement requirements in the instrs for Part V.)

33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity

	Yes	No
33	X	
34	X	

34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T
See L-35 Stmt

a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?

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

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.

b Did the organization file **Form 1120-POL** for this year?

38a 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 period covered by this return?

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations Enter:

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a 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 is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I

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

41 List the states with which a copy of this return is filed ► _____

40b	X
-----	---

42a The organization's books are in care of ► CARLSON ADVISORS, LLC Telephone no ► (763) 535-8150
Located at ► 7101 NORTHLAND CIRCLE #123 MINNEAPOLIS MN ZIP + 4 ► 55428

	Yes	No
42b	X	

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: ► _____

42c	X
-----	---

See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts.

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: ► _____

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	<input type="checkbox"/>
----	--------------------------

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
44	X	

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
45	X	

Part VI.

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

	Yes	No
46	X	
47	X	
48	X	
49a	X	
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 address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
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 ► _____

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 officer) is based on all information of which preparer has any knowledge		
	Signature of officer Kate M. Burgraff	Date 4-21-2010	
	Type or print name and title Kate M. Burgraff, President		
Paid Preparer's Use Only	Preparer's signature Steven N. Sorensen	Date 03/17/10	Check if self-employed <input checked="" type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 126 N 3rd St., Ste. B-1 Minneapolis	Preparer's Identifying Number (See Instructions) EIN ► Phone no ► (612) 339-9800	
May the IRS discuss this return with the preparer shown above? See instructions BAA <input type="checkbox"/> Yes <input type="checkbox"/> No			

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.

**Open to Public
Inspection**

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

MINNESOTA ASSOCIATION FOR VOLUNTEER ADMINISTRATION

Employer identification number

41-1463366

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 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 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 – Other
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 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
11 g (i)		
11 g (ii)		
11 g (iii)		

- (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?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organizations.

Total

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support**Calendar year (or fiscal year beginning in) ►**

- 1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')
- 2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf
- 3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1						
2						
3						
4						
5						
6						

Section B. Total Support**Calendar year (or fiscal year beginning in) ►**

- 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 ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7						
8						
9						
10						
11						
12						
13						

Section C. Computation of Public Support Percentage

- 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 %
- 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %

16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the 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 – 2008. 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 – 2009 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 – 2008. 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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	148,329.	101,855.	121,581.	107,242.	116,848.	595,855.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	18,037.	43,832.	114,255.	54,699.	109,185.	340,008.
3 Gross receipts from activities that are not an unrelated trade or business under section 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.	166,366.	145,687.	235,836.	161,941.	226,033.	935,863.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	50,000.	70,000.				120,000.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b	50,000.	70,000.				120,000.
8 Public support (Subtract line 7c from line 6.)						815,863.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	166,366.	145,687.	235,836.	161,941.	226,033.	935,863.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	474.	916.	5,218.	3,039.	1,427.	11,074.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	474.	916.	5,218.	3,039.	1,427.	11,074.
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)	0.	0.	0.	0.	5,578.	5,578.
13 Total support. (add Ins 9, 10c, 11, and 12)						952,515.

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 2009 (line 8, column (f) divided by line 13, column (f))	15	85.65 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	82.35 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	1.16 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	1.24 %
19a 33-1/3 support tests - 2009. 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 ▶ <input checked="" type="checkbox"/>		
b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 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 ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Other Income Part III, Line 12

Description: MISCELLANEOUS

2005: 0.

2006: 0.

2007: 0.

2008: 0.

2009: 5578.

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

<u>PAYROLL TAXES</u>	<u>5,154.</u>
<u>INSURANCE</u>	<u>1,890.</u>
<u>OTHER OFFICE EXPENSES</u>	<u>2,150.</u>
<u>INTO TECHNOLOGY</u>	<u>3,575.</u>
<u>CONFERENCES AND MEETINGS</u>	<u>107,813.</u>
<u>PROFESSIONAL DEVELOPMENT</u>	<u>1,009.</u>
<u>TRAVEL</u>	<u>6,074.</u>
 Total	<u>127,665.</u>

Explanation StatementForm/Line: Form 990-EZ, Part V Line 35Explanation of: Not Reporting Income on Form 990-TFEES FROM SEMINARS AND MEETINGS, RELATED TO EXEMPT PURPOSE

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations. Complete Part III

Name of organization

Employer identification number

MINNESOTA ASSOCIATION FOR VOLUNTEER ADMINISTRATION

41-1463366

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2** Political expenditures .
- 3** Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? _____
4a Was a correction made? _____
b If 'Yes,' describe in Part IV. _____

 Yes No
 Yes No

Part I-C: Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____

3 Total of exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group
B Check if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures – (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		153.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		0.	
c Total lobbying expenditures (add lines 1a and 1b)		153.	
d Other exempt purpose expenditures		222,660.	
e Total exempt purpose expenditures (add lines 1c and 1d)		222,813.	
f Lobbying nontaxable amount Enter the amount from the following table in both columns		44,563.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)		11,141.	
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	25,486.	55,686.	33,989.		115,161.
b Lobbying ceiling amount (150% of line 2a, column (e))					172,742.
c Total lobbying expenditures				153.	153.
d Grassroots nontaxable amount	6,372.	13,922.	8,497.		28,791.
e Grassroots ceiling amount (150% of line 2d, column (e))					43,187.
f Grassroots lobbying expenditures					

BAA

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1. Also, complete this part for any additional information.

Part IV | Supplemental Information (continued)

Name as Shown on Return

MINNESOTA ASSOCIATION FOR VOLUNTEER ADMINISTRATION

Employer Identification No
41-1463366

Line 24 - Other Assets:	Beginning of Year	End of Year
<u>GRANTS RECEIVABLE</u>	<u>15,000.</u>	<u>0.</u>
Totals to Form 990-EZ, Part II, line 24	15,000.	0.
Line 26 - Total Liabilities:	Beginning of Year	End of Year
<u>PAYROLL LIABILITIES</u>	<u>1,870.</u>	<u>1,876.</u>
Totals to Form 990-EZ, Part II, line 26	1,870.	1,876.

Additional Information

PART III - OTHER PROGRAMS

SPONSORED A STUDY TO LEARN ABOUT VOLUNTEERISM PRACTICES IN SOMALI,
HMONG AND LATINO COMMUNITIES TO DEVELOP TRAINING FOR NONPROFIT
AND GOVERNMENTAL ORGANIZATIONS ON HOW TO ENGAGE VOLUNTEERS FROM
IMMIGRANT COMMUNITIES

Schedule A (Form 990 or 990EZ) - Part IV - Supplemental Information (continued)

Schedule A (Form 990 or 990EZ) - Other Income (continued)

Description	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<u>MISCELLANEOUS</u>	0.	0.	0.	0.	5,578.	5,578.
Total	<u>0.</u>	<u>0.</u>	<u>0.</u>	<u>0.</u>	<u>5,578.</u>	<u>5,578.</u>

2009 MAVA Board of Directors

MAVA Board Role	Name & Term	Organization & Position	Mailing Address	Phone Numbers	Email Address
President	Kate M. Burggraft 2009	STEP Volunteer Coordinator	2239 Edgewood Ave S St. Louis Park, MN 55426	W—952.925.4899 x14 C—952.913.0243	kate@STEPSlb.org
President Elect	OPEN				
Past President	Katie Bottiger 2009	Hammer Residences Community Supports Director	1909 E. Wayzata Blvd. Wayzata, MN 55391	W—952.277.2427	Katie@hammer.org
Treasurer	Jeanne Hanson 2009	Oak Grove Lutheran Church Administrator	7045 Lyndale Ave. S. Richfield, MN 55423	W—612.869.4917	Jeanne@oakgrovelutheran.org
Secretary	Mary Capuzzi 2009	Ramsey County Human Services Volunteer Coordinator	160 E. Kellogg Blvd. #9800 St. Paul, MN 55101	W—651.266.4015	Mary.capuzzi@co.ramsey.mn.us
Nominations	OPEN				
Bylaws	OPEN				
Conference Co-Chair	OPEN				
Conference Co-Chair	OPEN				
Fund Development	Juli Okal 2008-2009	3M Industrial Markets	3M Center Building 225-4S-25 St. Paul, MN 55144	W—651.736.7580 C—651.503.1831	jokal@mnm.com
Leadership Development	Janene Riedeman 2008-2009	St. Cloud Hospital Director of Volunteer Services	1406 6 th Ave. S. St. Cloud, MN 56303	W—320.251.2700 x54482	nedemani@centracare.com
Marketing & Communications	OPEN				
Membership	Jay Haapala	Minnesota Children's Museum	10 West 7 th St St. Paul, MN 55102	W—651-255-6046	jhaapala@mcm.org
Professional Development	Deb Savitt	Jewish Family and Children's Services	13100 Wayzata Blvd Minnetonka, MN 55305	W—952-542-4859	dsavitt@jfcsmpls.org
Public Affairs	Renee Cardarelle 2008-2009		12290 62 nd St. NW Annandale, MN 55302	C—320.296.1840	r card@live.com

Special Projects	Lee George 2008-2009	Brain Injury Assoc. of MN Volunteer Manager	34 – 13 th Ave. NE Suite B001 Minneapolis, MN 55413	W—612.378.2742	leeg@braininjuryumn.org
Strategic Directions	Judie Russell 2008-2009		12315 Otchipwe Ave. N. Stillwater, MN 55082	H—651.439.9188	judithdrussell@hotmail.com
Volunteer Manager	Barb Mullikin, MS 2008-2009		10445 Sherman Dr Eden Prairie, MN 55347	H-952-946-1208	bmullikin@comcast.net
Administrators of Healthcare Volunteers Rep.	Pamela Mills 2009	Fairview Southdale Hospital Director of Volunteer Services	6401 France Ave. S. Edina, MN 55435	W—952.924.5022	Pmills1@fairview.org
Administrators of Healthcare Volunteers Rep.	Paula Cronquist 2009	Gillette Children's Specialty Healthcare Volunteer Services Manager	200 E. University Ave. St. Paul, MN 55101	W—651.229.3937	pcronquist@gillettechildrens.com
Directors of Church Volunteer Ministries Rep.	Pat Keyes 2009		2407 39 th Ave. NE #209 St. Anthony, MN 55421	H—612.253.7730	patkeyes@hotmail.com

MAVA Staff Role	Name	Mailing Address	Phone Numbers	Email Address
VRL Project Manager	Mary Quirk	1800 White Bear Ave. N. Maplewood, MN 55109	W—651.255.0469	mquirk@mavanetwork.org
Membership Services Associate	Katie Bull	1800 White Bear Ave. N. Maplewood, MN 55109	W—651.255.0469 FAX—651.255.0460	office@mavanetwork.org
VISTA—Twin Cities (Aug 2009—Aug 2010)	Helen Young	1800 White Bear Ave. N. Maplewood, MN 55109	W—651.255.0469 FAX—651.255.0460	hyoung@mavanetwork.org
VISTA—Rochester (Aug 2009—Aug 2010)	Kristi Kehrwald	United Way of Olmsted County 903 W. Center St. Suite 100 Rochester, MN 55902	W—507.287.2000 x 118	kristik@uwolmsted.org