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Form **990**Department of the Treasury
Internal Revenue Service**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)

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

OMB No 1545-0047

2009Open to Public
Inspection**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010****B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type
See Specific Instructions**C** Name of organization**MINNESOTA STATE BAR ASSOCIATION**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)
600 NICOLLET MALLRoom/suite
380City or town, state or country, and ZIP + 4
MINNEAPOLIS, MN 55402**F** Name and address of principal officer: **TIM GROSHENS**
SAME AS C ABOVE**D** Employer identification number**41-1112298****E** Telephone number**612-333-1183****G** Gross receipts \$ **7,544,369.****H(a)** Is this a group returnfor affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c) (**6**) (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.MNBAR.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation **1973** **M** State of legal domicile: **MN****Part I** Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO PROMOTE THE STUDY & UNDERSTANDING OF LAW AMONG MEMBERS OF THE BAR & THE GENERAL PUBLIC.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	124
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	124
	5	Total number of employees (Part V, line 2a)	5	52
	6	Total number of volunteers (estimate if necessary)	6	124
		7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a
b		Net unrelated business taxable income from Form 990-T, line 34	7b	<52,149.>
Revenue	8	Contributions and grants (Part VIII, line 1h)		
	9	Program service revenue (Part VIII, line 2g)	6,053,615.	6,128,169.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<367,356.>	136,950.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	29,545.	147,269.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,715,804.	6,412,388.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14		Benefits paid to or for members (Part IX, column (A), line 4)		
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,432,810.	2,474,197.
16a		Professional fundraising fees (Part IX, column (A), line 11e)		
b		Total fundraising expenses (Part IX, column (A), line 12e)		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f, 24f)	3,810,219.	3,973,333.
18		Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	6,243,029.	6,447,530.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	<527,225.>	<35,142.>
	20	Total assets (Part X, line 16)	Beginning of Current Year 6,031,028.	End of Year 5,921,120.
	21	Total liabilities (Part X, line 26)	3,603,616.	3,433,526.
	22	Net assets or fund balances. Subtract line 21 from line 20	2,427,412.	2,487,594.

Part II Signature Block

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

Signature of officer

Date

Type or print name and title

Tim Groshens**Executive Director**

Paid Preparer's Use Only

Preparer's signature

Linda M. Nelson, CPA

Date

1/11/2011Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

OLSEN THIELEN & CO., LTD
2675 LONG LAKE ROAD
ST. PAUL, MN 55113

EIN ▶

Phone no. ▶ **651-483-4521**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

SCANNED FEB 08 2010

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Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

THE MINNESOTA STATE BAR ASSOCIATION IS A NON-PROFIT CORPORATION WHOSE OBJECTIVES ARE PRIMARILY TO PROMOTE STUDY AND UNDERSTANDING OF LAW AMONG MEMBERS OF THE BAR AND GENERAL PUBLIC, TO FOSTER RESPECT FOR THE LAW AND TO MAINTAIN THE INTEGRITY OF THE LEGAL PROFESSION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
 BENCH & BAR IS MSBA'S PREMIER PUBLICATION, PROVIDING MEMBERS WITH MONTHLY UPDATES ON DEVELOPMENTS IN THE LAW, ISSUES FACING THE PROFESSION, PRACTICE TIPS, ANALYSIS AND COMMENTARY.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
 ANNUAL CONVENTION: MEETING OF ASSOCIATION'S MEMBERS AND OTHER LEGAL ASSOCIATIONS TO CONDUCT ANNUAL BUSINESS MEETINGS, EDUCATIONAL PROGRAMS, SOCIAL EVENTS AND OTHER ACTIVITIES.

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
 THE ASSOCIATION PROVIDES THE SERVICE OF COLLECTING DUES FOR VARIOUS OTHER ORGANIZATIONS. SUCH DUES ARE COLLECTED WITH THE ASSOCIATION'S DUES, AND ARE SUBSEQUENTLY FORWARDED TO THE APPROPRIATE ORGANIZATIONS. DUES COLLECTED FOR/REMITTED TO: DISTRICTS \$1,730,049, MN INTELLECTUAL PROPERTY LAW ASSN. \$61,587, MN STATE BAR FOUNDATION \$102,502.

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II N/A</i>		
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes X	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	N/A	
b Is the organization 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	25b	N/A	
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	N/A	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	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)?		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	X	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7	Organizations that may receive deductible contributions under section 170(c). N/A		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
9a	Sponsoring organizations maintaining donor advised funds. N/A		
9b	Did the organization make any taxable distributions under section 4966?		
10	Section 501(c)(7) organizations. Enter N/A		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter N/A		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body		
1b Enter the number of voting members that are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	X	
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	N/A	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **TIM GIVING - 612-333-1183**
600 NICOLLET MALL #380, MINNEAPOLIS, MN 55402

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LEO BRISBOIS PRESIDENT	24.00	X		X				0.	0.	0.
TERRANCE VOTEL PRESIDENT-ELECT	15.00	X		X				0.	0.	0.
ROBERT ENGER SECRETARY	7.00	X		X				0.	0.	0.
MICHAEL FORD PAST PRESIDENT	0.50	X		X				0.	0.	0.
BRENT ROUTMAN TREASURER	7.00	X		X				0.	0.	0.
DAVID AAFEDT ADMINISTRATIVE LAW REP	0.50	X						0.	0.	0.
DAVID AHLVERS ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
DIANE ALSHOUSE PUBLIC LAW VOTING REP	0.50	X						0.	0.	0.
LACEE ANDERSON ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
THOMAS ANDERSON, III IMMIGRATION VOTING REP	0.50	X						0.	0.	0.
ERIK ASKEGAARD/OUTSTATE PRACTICE VOTING REP	0.50	X						0.	0.	0.
MIGUEL AZAR COMPUTER LAW VOTING REP	0.50	X						0.	0.	0.
ANN BARKER DISTRICT 05 VOTING REP	0.50	X						0.	0.	0.
G BEAUMASTER/ MN COUNTY ATTORNEYS VOTING REP	0.50	X						0.	0.	0.
JENNIFER BISHOP BUSINESS LAW VOTING REP	0.50	X						0.	0.	0.
MARK BLOOMQUIST CONSTRUCTION LAW REP	0.50	X						0.	0.	0.
HILDY BOWBEER/MCLE BOARD CHAIR VOTING REP	0.50	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
W BRUCKNER ANTITRUST LAW VOTING REP	0.50	X						0.	0.	0.
SUSAN BURKE NAPABA VOTING REP	0.50	X						0.	0.	0.
CHRISTINE CASSELLIUS DISTRICT 01 VOTING REP	0.50	X						0.	0.	0.
JOSHUA CHRISTENSEN DISTRICT 19 VOTING REP	0.50	X						0.	0.	0.
EDWARD CLEARY ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
THOMAS CONLIN/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
ANGEL DAHER/MN AMERICAN INDIAN BAR VOTING REP	0.50	X						0.	0.	0.
FREDERICK DAWE/INT'L BUSINESS VOTING REP	0.50	X						0.	0.	0.
CRAIG DOKKEN/ DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
ERIKA DONNER NEW LAWYERS VOTING REP	0.50	X						0.	0.	0.
1b Total								234,895.	0.	61,578.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

- 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

- 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a MEMBERSHIP DUES	Business Code 900099	5388226.	5388226.			
	b PUBLICATION REV.	541800	282,316.	7,125.	275,191.		
	c MBR CERTIFICATION	900099	176,319.	174,400.	1,919.		
	d LEGAL ASSISTANCE	541100	173,610.	158,610.	15,000.		
	e MOCK TRIAL	900099	37,282.	37,282.			
	f All other program service revenue	900099	70,416.	38,793.	25,373.	6,250.	
	g Total. Add lines 2a-2f		6128169.				
	3 Investment income (including dividends, interest, and other similar amounts)		70,226.			70,226.	
4 Income from investment of tax exempt bond proceeds							
5 Royalties		123,302.			123,302.		
Other Revenue	6 a Gross Rents	(i) Real (ii) Personal					
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	1,198,705.				
	b Less: cost or other basis and sales expenses		1,131,981.				
	c Gain or (loss)		66,724.				
	d Net gain or (loss)		66,724.			66,724.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue		Business Code				
11 a LABELS AND MAILING	900099	14,416.	14,416.				
b MISCELLANEOUS	900099	9,551.			9,551.		
c							
d All other revenue							
e Total. Add lines 11a-11d		23,967.					
12 Total revenue. See instructions		6412388.	5818852.	317,483.	276,053.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	320,788.			
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	1,668,509.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	147,168.			
9 Other employee benefits	179,519.			
10 Payroll taxes	158,213.			
11 Fees for services (non-employees)				
a Management				
b Legal	3,936.			
c Accounting	23,192.			
d Lobbying	123,331.			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	128,707.			
12 Advertising and promotion	26,420.			
13 Office expenses	358,921.			
14 Information technology	53,726.			
15 Royalties				
16 Occupancy	266,036.			
17 Travel	73,088.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	310,535.			
20 Interest				
21 Payments to affiliates	1,894,138.			
22 Depreciation, depletion, and amortization	78,451.			
23 Insurance	24,388.			
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 REIMBURSEMENTS/REFUNDS	177,273.			
b LICENSE FEE	102,065.			
c MISCELLANEOUS	95,078.			
d CREATIVE SERVICES	82,307.			
e SECTIONS EXPENSE	70,120.			
f All other expenses	81,621.			
25 Total functional expenses. Add lines 1 through 24f	6,447,530.			
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.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	3,126,685.	2	2,858,290.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	76,923.	4	158,918.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	7,047.	9	22,581.
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a 2,047,836.		
	b Less: accumulated depreciation	10b 1,842,941.	10c 264,458.	204,895.
	11 Investments - publicly traded securities	2,491,523.	11	2,609,228.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	64,392.	15	67,208.
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,031,028.	16	5,921,120.	
Liabilities	17 Accounts payable and accrued expenses	1,340,357.	17	1,213,333.
	18 Grants payable		18	
	19 Deferred revenue	2,198,867.	19	2,152,985.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	64,392.	25	67,208.
	26 Total liabilities. Add lines 17 through 25	3,603,616.	26	3,433,526.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,427,412.	27	2,487,594.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	2,427,412.	33	2,487,594.	
34 Total liabilities and net assets/fund balances	6,031,028.	34	5,921,120.	

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2009)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2009

Open to Public
Inspection

▶ **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

MINNESOTA STATE BAR ASSOCIATION

Employer identification number

41-1112298

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? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

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 exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ ☐ Yes ☐ No
- 4 Did the filing organization file Form 1120-POL for this year?
- 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2009

LHA

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)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns.			
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)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -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?			

☐ Yes ☐ 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 on page 4.)

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 nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009
Open to Public
Inspection

Name of the organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number
41-1112298

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,048,812.	877,718.	171,094.
d Equipment		999,024.	965,223.	33,801.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				204,895.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
1 Federal income taxes	
DEFERRED COMPENSATION	67,208.
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ►	
	67,208.

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,412,388.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,447,530.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	<35,142.>
4	Net unrealized gains (losses) on investments	4	95,324.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	95,324.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	60,182.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	4,613,574.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	95,324.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	95,324.
3	Subtract line 2e from line 1	3	4,518,250.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	1,894,138.
c	Add lines 4a and 4b	4c	1,894,138.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	6,412,388.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	4,553,392.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,553,392.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	1,894,138.
c	Add lines 4a and 4b	4c	1,894,138.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	6,447,530.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X: FIN 48 DISCLOSURE: EFFECTIVE JULY 1, 2009, THE

ASSOCIATION ADOPTED NEW GUIDANCE RELATED TO UNCERTAINTY IN INCOME TAXES.

THIS GUIDANCE CLARIFIES THE RECOGNITION THRESHOLD AND MEASUREMENT

REQUIREMENTS FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN

INCOME TAX RETURNS. UNDER THE NEW STANDARDS, THE ASSOCIATION RECOGNIZES

TAX BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN

NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY TAXING

AUTHORITIES. PRIOR TO JULY 1, 2009, THE ASSOCIATION ACCRUED LIABILITIES

Part XIV Supplemental Information (continued)

FOR UNCERTAIN TAX POSITIONS IF LOSSES WERE PROBABLE AND COULD BE
REASONABLY ESTIMATED. THE ASSOCIATION HAS IDENTIFIED NO SIGNIFICANT
INCOME TAX UNCERTAINTIES.

THE MSBA IS OPEN TO EXAMINATION FOR TAX YEARS 2006 THROUGH 2008. THE MSBA
HAD NO INCOME TAX EXPENSE FOR 2010 OR 2009. THERE WERE NO CASH PAYMENTS
FOR INCOME TAXES IN 2010 OR 2009.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

MEMBERSHIP DUES COLLECTED FOR MSBA DISTRICTS, MN INTELLECTUAL
PROPERTY LAW ASSN.AND MN STATE BAR FOUNDATION: 1894138.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

MEMBERSHIP DUES COLLECTED FOR MSBA DISTRICTS, MN INTELLECTUAL
PROPERTY LAW ASSN.AND MN STATE BAR FOUNDATION: 1894138.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number

41-1112298

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|--|---|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,
trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's
CEO/Executive Director. Check all that apply.

- | | |
|--|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing
organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

N/A

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation
contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation
contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments
not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the
initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in
Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the Organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number
41-1112298

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN DORNIK/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
KEVIN DUFFY DISTRICT 14 VOTING REP	0.50	X						0.	0.	0.
DYAN EBERT ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
KALENE ENGEL DISTRICT 03 VOTING REP	0.50	X						0.	0.	0.
MARGARET ERICKSON ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
FREDERICK FINCH ABA DELEGATE REP	0.50	X						0.	0.	0.
BRIGID FITZGERALD DISTRICT 07 VOTING REP	0.50	X						0.	0.	0.
ARDEN FRITZ DISTRICT 18 VOTING REP	0.50	X						0.	0.	0.
MARLENE GARVIS/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
LORIE GILDEA ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
LORIE GILDEA SUPREME COURT VOTING REP	0.50	X						0.	0.	0.
DAVID GRAHAM FOOD AND DRUG VOTING REP	0.50	X						0.	0.	0.
BRIAN GROGAN COMM. VOTING REP	0.50	X						0.	0.	0.
JOHN GUTHMANN/DISTRICT 02 (RCBA) VOTING REP	0.50	X						0.	0.	0.
LAURA HAGE ANIMAL LAW VOTING REP	0.50	X						0.	0.	0.
ADAM HEATON/GENERAL PRACTICE VOTING REP	0.50	X						0.	0.	0.
TIMOTHY HELGESEN DISTRICT 11 VOTING REP	0.50	X						0.	0.	0.
JOHN HENNEN DISTRICT 19 VOTING REP	0.50	X						0.	0.	0.
GARY HIRD DISTRICT 10 VOTING REP	0.50	X						0.	0.	0.
MELISSA HOUGHTALING/ MN LAVENDER BAR VOTING REP	0.50	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the Organization

MINNESOTA STATE BAR ASSOCIATION

Employer Identification number
41-1112298

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC JANUS/WILLIAM MITCHELL COLLEGE OF LAW	0.50	X						0.	0.	0.
JAMES JOHNSON/PUBLIC UTILITIES VOTING REP	0.50	X						0.	0.	0.
NANCY KLEEMAN/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
CHARLES KNAPP/LABOR & EMPLOYMENT VOTING REP	0.50	X						0.	0.	0.
RICHARD KYLE, JR DISTRICT 02 (RCBA) REP	0.50	X						0.	0.	0.
CAROLINA LAMAS/MN HISPANIC BAR VOTING REP	0.50	X						0.	0.	0.
JEREMY LANE/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
ERIC LARSON/DISTRICT 02 (RCBA) VOTING REP	0.50	X						0.	0.	0.
BRICKER LAVIK/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
JEANNINE LEE FEDERAL BAR VOTING REP	0.50	X						0.	0.	0.
ALLISON LEPPERT TAX LAW VOTING REP	0.50	X						0.	0.	0.
DONALD LEWIS/HAMILINE LAW SCHOOL VOTING REP	0.50	X						0.	0.	0.
THADDEUS LIGHTFOOT ENVIRONMENT VOTING REP	0.50	X						0.	0.	0.
BRYAN LINDSAY/DISTRICT 20 (RANGE) VOTING REP	0.50	X						0.	0.	0.
RICHARD LITTLE REAL PROPERTY VOTING REP	0.50	X						0.	0.	0.
DANIEL MCGRATH/CIVIL LITIGATION VOTING REP	0.50	X						0.	0.	0.
THOMAS MENGLER ST THOMAS SCHOOL OF LAW	0.50	X						0.	0.	0.
JOHN MERKLE/EMPLOYEE BENEFITS VOTING REP	0.50	X						0.	0.	0.
SUSAN MILES/MN DISTRICT JUDGES VOTING REP	0.50	X						0.	0.	0.
SONIA MILLER-VAN OORT DISTRICT 04 (HCBA) REP	0.50	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009
Open to Public
Inspection

Name of the Organization

MINNESOTA STATE BAR ASSOCIATION

Employer Identification number
41-1112298

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ALICIA MILLS MIPLA VOTING REP	0.50	X						0.	0.	0.
LISA MONTPETIT BRABBIT ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
DAVID MOODY DISTRICT 12 VOTING REP	0.50	X						0.	0.	0.
NEIL NELSON DISTRICT 16 VOTING REP	0.50	X						0.	0.	0.
CARA NEVILLE ABA DELEGATE REP	0.50	X						0.	0.	0.
JESSIE NICHOLSON DISTRICT 02 (RCBA) REP	0.50	X						0.	0.	0.
MATTHEW NIELSEN DISTRICT 17 VOTING REP	0.50	X						0.	0.	0.
RICHARD OHLENBERG CRIMINAL LAW VOTING REP	0.50	X						0.	0.	0.
ELLIS OLKON/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
PAUL ONKKA DISTRICT 08 VOTING REP	0.50	X						0.	0.	0.
ELENA OSTBY/DISTRICT 02 (RCBA) VOTING REP	0.50	X						0.	0.	0.
GEORGE PEREZ ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
PAUL PETERSON MN TRIAL LAWYERS VOTING	0.50	X						0.	0.	0.
TAMI PETERSON FAMILY LAW VOTING REP	0.50	X						0.	0.	0.
JULIE PLUMITIS/MN LAVENDER BAR VOTING REP	0.50	X						0.	0.	0.
NATHALIE RABUSE/AMER ACA OF MATRIMONIAL LAWYERS	0.50	X						0.	0.	0.
KRISTI RILEY DISTRICT 21 VOTING REP	0.50	X						0.	0.	0.
JAMES ROGERS/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
MURRAY SAGSVEEN HEALTH LAW VOTING REP	0.50	X						0.	0.	0.
KATHLEEN SANBERG ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

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Name of the Organization

MINNESOTA STATE BAR ASSOCIATION

Employer Identification number
41-1112298

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL SCHECHTER/CORP. COUNSEL VOTING REP	0.50	X						0.	0.	0.
LENOR SCHEFFLER/MN AMER. INDIAN BAR VOTING REP	0.50	X						0.	0.	0.
JOHN SCHÜLZ ADR ASSEMBLY REP	0.50	X						0.	0.	0.
ULRIC SCOTT, III PRACTICE MGMT VOTING REP	0.50	X						0.	0.	0.
MARY SEAWORTH DISTRICT 14 VOTING REP	0.50	X						0.	0.	0.
MARY SHEAREN/PROBATE & TRUST VOTING REP	0.50	X						0.	0.	0.
ERIC SHERBURNE BANKRUPTCY VOTING REP	0.50	X						0.	0.	0.
JOHN SMITH/MN DISTRICT JUDGES VOTING REP	0.50	X						0.	0.	0.
STEPHEN SMITH/MN ASSN OF BLACK LAWYERS VOTING REP	0.50	X						0.	0.	0.
SUSAN SMITH CHILDRENS LAW VOTING REP	0.50	X						0.	0.	0.
JOEL SOLIE DISTRICT 09 VOTING REP	0.50	X						0.	0.	0.
JAMES SONG NAPABA VOTING REP	0.50	X						0.	0.	0.
JAMES SPECKMANN/DISTRICT 02 (RCBA) VOTING REP	0.50	X						0.	0.	0.
KRISTI STANISLAWSKI DISTRICT 07 VOTING REP	0.50	X						0.	0.	0.
SUSAN STEPHAN ART & ENTERTAINMENT REP	0.50	X						0.	0.	0.
JONATHAN STRAUSS DISTRICT 04 (HCBA) REP	0.50	X						0.	0.	0.
NENA STREET/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
JEFFREY STREIFFER AGRICULTURAL LAW REP	0.50	X						0.	0.	0.
RICHARD THOMAS/MN DEFENSE LAWYERS REP	0.50	X						0.	0.	0.
MOLLY THORNTON/MN WMN LAWYERS VOTING REP	0.50	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the Organization

MINNESOTA STATE BAR ASSOCIATION

Employer Identification number
41-1112298

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BRADLEY THORSEN/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
THOMAS TINKHAM/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
ANDREW TITUS/DISTRICT 13 VOTING REP	0.50	X						0.	0.	0.
EDWARD TOUSSAINT, JR COURT OF APPEALS VOTING	0.50	X						0.	0.	0.
PATRICIA TRASK/DISTRICT 15 VOTING REP	0.50	X						0.	0.	0.
PHILLIP TROBAUGH DISTRICT 04 (HCBA) REP	0.50	X						0.	0.	0.
KATIE TROTZKY/DISTRICT 01 VOTING REP	0.50	X						0.	0.	0.
MICHAEL UNGER/DISTRICT 04 (HCBA) VOTING REP	0.50	X						0.	0.	0.
MARY WARD ASSEMBLY COUNCIL MEMBER	0.50	X						0.	0.	0.
COURTNEY WARD-REICHARD DISTRICT 04 (HCBA) REP	0.50	X						0.	0.	0.
CHARLES WEBBER/APPELLATE PRACTICE VOTING REP	0.50	X						0.	0.	0.
KENNETH WHITE DISTRICT 06 VOTING REP	0.50	X						0.	0.	0.
DAVID WIPPMAN/U OF M LAW SCHOOL VOTING REP	0.50	X						0.	0.	0.
JENNIFER WRIGHT ELDER LAW VOTING REP	0.50	X						0.	0.	0.
TIM GROSHENS EXECUTIVE DIRECTOR	40.00			X				174,784.	0.	46,869.
TIM GIVING DIRECTOR OF FINANCE	40.00			X				60,111.	0.	14,709.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number
41-1112298

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMITTEE & SECTION COORDINATION: GIVES MEMBERS THE OPPORTUNITY TO
GAIN INFORMATION AND ENHANCE THEIR SKILLS AND KNOWLEDGE IN A PARTICULAR
FIELD OF LAW, INFLUENCING CHANGES IN THE LEGISLATURE AND COMMUNITY,
KEEPING MEMBERS ABREAST OF DEVELOPMENTS IN THEIR FIELD, AND PROVIDING A
FORUM TO NETWORK AND BUILD RELATIONSHIPS.

FORM 990, PART VI, SECTION A, LINE 2: MICHAEL UNGER AND KATHLEEN SANBERG,
BOTH MEMBERS OF THE ASSEMBLY - FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS REGULAR
MEMBERS, RETIRED MEMBERS, EMERITUS MEMBERS AND ASSOCIATE MEMBERS. THE
ORGANIZATION'S BYLAWS DEFINE THE SEPARATE CLASSES OF MEMBERSHIP AND THE
RIGHTS, PRIVILEGES AND RESPONSIBILITIES OF EACH CLASS.

FORM 990, PART VI, SECTION A, LINE 7A: THE ASSOCIATION'S BYLAWS, WHICH ARE
POSTED ON THE ORGANIZATION'S WEBSITE, DETAIL THE ASSOCIATION'S STRUCTURE,
INCLUDING THE REPRESENTATION IN THE ASSOCIATION'S ASSEMBLY.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 WILL BE REVIEWED BY THE
AUDIT SUBCOMMITTEE, OPERATIONS COMMITTEE, THE COUNCIL MEMBERS AND THE
ASSEMBLY MEMBERS BEFORE BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICTS OF INTEREST ARE MANAGED
THROUGH THE ASSOCIATION'S EXECUTIVE DIRECTOR AND COUNCIL, AS DESCRIBED IN
THE WRITTEN POLICY, WHICH IS POSTED ON MSBA'S WEBSITE.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number
41-1112298

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION HAS A PERSONNEL
COMMITTEE THAT DETERMINES AND APPROVES COMPENSATION AND BENEFITS. THE
COMMITTEE USES COMPENSATION SURVEYS TO SUPPORT ITS DETERMINATION OF
EXECUTIVE COMPENSATION AND BENEFITS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
AVAILABLE UPON WRITTEN REQUEST. THE MSBA'S GOVERNING DOCUMENTS, INCLUDING
ITS ARTICLES OF INCORPORATION, BYLAWS AND ORGANIZATIONAL STRUCTURE ARE ON
MSBA'S WEBSITE.

Name of the organization

MINNESOTA STATE BAR ASSOCIATION

Employer identification number
41-1112298

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

[illegible]

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
MINNESOTA CONTINUING LEGAL EDUCATION - 61-15711924, 2550 UNIVERSITY AVENUE WEST, #160S, ST. PAUL, MN 55114	CONTINUING LEGAL EDUCATION	MINNESOTA	501(C)(3)	11A - TYPE I	N/A
MINNESOTA STATE BAR FOUNDATION - 41-6023581	AWARD GRANT MONIES TO LAW RELATED CHARITABLE ORGANIZATIONS	MINNESOTA	501(C)(3)	7	N/A
600 NICOLLET MALL #380 MINNEAPOLIS, MN 55402					
MINNESOTA VOLUNTEER ATTORNEY PROGRAM, INC. - 41-1449176, 600 NICOLLET MALL #380, MINNEAPOLIS, MN 55402	SUPPORT FOR VOLUNTEER ATTORNEYS	MINNESOTA	501(C)(3)	7	N/A
LAWYERS PUBLIC AFFAIRS COMMISSION 600 NICOLLET MALL #380 MINNEAPOLIS, MN 55402	POLITICAL ACTION COMMITTEE	MINNESOTA	527		N/A

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

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

		(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)	NO TRANSACTIONS WITH RELATED ORGANIZATIONS EXCEEDED REPORTING THRESHOLDS.			
(2)				
(3)				
(4)				
(5)				
(6)				

Form **8868**
(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization	Employer Identification number
	MINNESOTA STATE BAR ASSOCIATION	41-1112298
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 600 NICOLLET MALL, NO. 380	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MINNEAPOLIS, MN 55402	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

TIM GIVING

- The books are in the care of ▶ **600 NICOLLET MALL #380 - MINNEAPOLIS, MN 55402**
Telephone No. ▶ **612-333-1183** FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☐ calendar year _____ or
- ▶ ☒ tax year beginning **JUL 1, 2009**, and ending **JUN 30, 2010**.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 4-2009)