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## Form **990-EZ**

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

OMB No 1545-1150

≈ Open to Public :

		► The organization	n may nave to use a copy of this return	to saus	ny state re	eporting rec	juireme	nts.	inspection . S &
		e 2009 calendar year, or tax year b	eginning JUL 1, 2009		and en	ding JU	N 3(		2010
В	Check if	le Please C Name of organization					D Emp	loyer	identification number
	Addre	ss use IRS label or							
	Name chang	, print or MINNESOTA STA	TE BAR FOUNDATION				41	L-6	023581
	Initia retur	Number and street (or P O	E Tele	E Telephone number					
	Term	m- Specific 600 NTCOLLET	61	L2-	333-1183				
	Ame	Instruc- inded tions City or town, state or coun	itry, and ZIP + 4				F Grou	id Exe	emption
Ē	Applic Pendir		MN 55402					ber 🕨	•
_			)(1) nonexempt charitable trusts must attac	h a con	nnleted	G Accou			<del></del>
			(Form 990 or 990-EZ).			1	specify)		
1	Websi	te: WWW.MNBAR.ORG/F				<del></del> `	·		the organization is <b>not</b>
		empt status (check only one) _ X 50		(1) or	52				dule B (Form 990, 990-EZ or 990-PF)
	Check		on 509(a)(3) supporting organization and its						
			, but if the organization chooses to file a retui						<b>,</b>
	Add Im		ross receipts; if \$500,000 or more, file Form					\$	318,062.
	art I		Changes in Net Assets or Fun				uctions 1		
	1	Contributions, gifts, grants, and similar at	<del></del>	-	<u>`</u>			1	113,032.
	2	Program service revenue including gover					T	2	
	3	Membership dues and assessments					r	3	
	4	Investment income					F	4	18,598.
	5a	Gross amount from sale of assets other t	than inventory STMT 4	5a	1	186,4	32.	3237	
		Less: cost or other basis and sales expen	······································	5b	<del>                                     </del>	191,1			
	C	•	han inventory (Subtract line 5b from line 5a)					5c	-4,686.
0	6		oplicable parts of Schedule G). If any amount	ie from	asmina (	hack hara	.c	رميني. رمينيو.	
'n	1	Gross revenue (not including \$	of contributions	. 13 11 0111	Semin's	andok nord			
Revenue	4		Of Contributions	1 60	1		ľ		
Œ	١.	reported on line 1)		6a 6b	<del> </del>		I	144	1
	"	Less: direct expenses other than fundrais		00	L	· · · · · · · · · · · · · · · · · · ·			
	<sup>C</sup>		and activities (Subtract line 6b from line 6a)	۱	ı		F	6c	<del></del>
<b>.</b>		Gross sales of inventory, less returns and	1 allowances	7a				Part Co	
2011	b	Less: cost of goods sold		7b	<u> </u>				
7	C	Gross profit or (loss) from sales of invent	tory (Subtract line /b from line /a)					7c	
160	8	Other revenue (describe	Valley I			<del></del>	—, } ├	8	126 044
<del>-</del>	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6		CITIZ	m C			9	126,944.
$\overset{\sim}{\sim}$	10	Grants and similar amounts paid (attach	schedule)	STM	T 6		-	10	107,517.
xpjenses //PR	11	Benefits paid to or for members D 2 2	2011 . [8]					11	
ses.	12	Salaries, other compensation, and emplo	yee benefits   chi					12	
181	13	Professional fees and other payments to					-	13	6,262.
X	14	Occupancy, rent, utilities, and maintenand						14	
7	15	Printing, publications, postage, and shipp		~			.	15	00.044
SC/\E	16	Other expenses (describe		SEE	STAT	EMENT	1)	16	27,011.
<u>(1)</u>	17	Total expenses. Add lines 10 through 16					<b>•</b>	17	140,790.
es.	18	Excess or (deficit) for the year (Subtract I						18	-13,846.
Set	19	Net assets or fund balances at beginning	· · · · · · · · · · · · · · · · · · ·					<u>ئى ئ</u> ى	000 400
As		(must agree with end-of-year figure repoi	· · · · · · · · · · · · · · · · · · ·				_	19	903,139.
Net Assets	20	Other changes in net assets or fund balar	\	SEE	STAT	EMENT	5	20	128,516.
	21	Net assets or fund balances at end of year					<u> </u>	21	1,017,809.
Pa	art II		s on line 25, column (B) are \$1,250,000 or m	nore, file				-EZ.	
		(See the instruction	ns for Pa∏ II.)		(A)	Beginning o		╄	(B) End of year
22		h, savings, and investments			<u> </u>	191,	278	_	82,850.
23		d and buildings			<u> </u>		<u> </u>	23	
24		er assets (describe	SEE STATEMENT	<u>r 2</u>	)	735,			955,755.
25		al assets				927,			1
26		al liabilities (describe 🚩	SEE STATEMENT	<u>r 3</u>	)		066		
27	Net	assets or fund balances (line 27 of colum				903,	139	27	
932 02-0	171 18-10	LHA For Privacy Act and Paperwork	Reduction Act Notice, see the separate ins	struction	18.			-	Form <b>990-EZ</b> (2009)

_	m 990-EZ (2009) MINNESOTA STATE BAR FOUND			41-	60235	81 Page
	art III Statement of Program Service Accomplishme		Part III.)		4.	xpenses
Wh	at is the organization's primary exempt purpose? SEE STATEMENT	1 10				or section 501(c)(3)  I) organizations and
De	scribe what was achieved in carrying out the organization's exempt pur	poses. In a clear and conc	use manner, descr	ibe		7(a)(1) trusts, optiona
the	services provided, the number of persons benefited, and other relevan	nt information for each prog	gram title.		for others )	
28	SEE STATEMENT 8					
					1 1	
		-				
	(Grants \$ 74,120.) If this amount includes foreign (	rants, check here	<b>•</b>		28a	74,120.
29	SEE STATEMENT 9	,	<u></u>			
		-				
	(Grants \$ 33,397.) If this amount includes foreign of	renta chaek hara	•	$\top$	29a	33,397.
30	Charles \$ 337337. ) It this amount includes foreign t	jiants, check here .			234	33,337.
JU		<del></del>	****			
	(Grants \$ ) If this amount includes foreign g	grants, check here .	<u></u> ▶		30a	
31	Other program services (attach schedule)					
	(Grants \$ ) If this amount includes foreign of	rants, check here			31a	
	Total program service expenses (add lines 28a through 31a)			<u> </u>	32	107,517.
Р	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	ven if not compensated	(See the	instructions f	or Part IV)
		437.1		(d) Co	ntributions	
	(a) Name and address	(b) Title and average hours	(c) Compensation		mployee	(e) Expense
	(a) Mariic and dudicss	per week devoted to position	(If not paid, enter -0)		fit plans & eferred	account and other allowances
		position	-0,	1	pensation	ottici allowances
TZ	MES PATRICK BARONE, 600 NICOLLET	PRESIDENT		1		
	ALL, #380, MINNEAPOLIS, MN 55402	0.75	0.		0.	0.
		VICE PRESIDEN		<b></b>		0.
					0	_
	COLLET MALL, #380, MINNEAPOLIS, MN	1.00	0.	<b> </b>	0.	0.
		TREASURER				
	380, MINNEAPOLIS, MN 55402	0.75	0.	L	0.	0.
	ARREN H. ORTLAND, 600 NICOLLET	SECRETARY				
	ALL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER				
#3	880, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
St	JE BORES, 600 NICOLLET MALL, #380,	MSBA STAFF/ME	MBER			
ΜI	NNEAPOLIS, MN 55402	1.00	0.	i	0.	0.
BF	RUCE P. CANDLIN, 600 NICOLLET MALL,	MEMBER				
	80, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER		<del>                                     </del>		
	880, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER		<del> </del>		<u> </u>
	ALL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER	0.	<b>-</b>	<u> </u>	0.
		1	,		0	_
	COLLET MALL, #380, MINNEAPOLIS, MN	0.50	0.	ļ	0.	0.
		MEMBER			_	_
	LL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER				
	80, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
JΙ	LL LEBOW PROHOFSKY, 600 NICOLLET	MEMBER				
MA.	LL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER				
	LL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
PΆ		MEMBER	<del>-</del>			
	LL, #380, MINNEAPOLIS, MN 55402	0.50	0.		0.	0.
		MEMBER	<u> </u>		0.	J .
					^	
r J	80, MINNEAPOLIS, MN 55402	0.50	0.	<del> </del>	0.	0.
		1	ı	1		1

932172 02-08-10

Form **990-EZ** (2009)

٢٢٥	Other Information (Note the statement requirements in the instructions for Fact v.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	. 03	X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b>		- 2	- 3
-	reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		2	4:92:
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,	~	~~~	27. 27.
Ī	and proxy tax requirements?	35a		x
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
-	complete applicable parts of Sch. N	36		Х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.	155	135	যা, 1
	Did the organization file Form 1120-POL for this year?	37b	,	X
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	3247	ا تىر د د	200
	in a prior year and still outstanding at the end of the period covered by this return?	38a	106 112	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A	100	P1,5 \$	5
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9		75. 37.	
b	Gross receipts, included on line 9, for public use of club facilities  39b  N/A			
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	, 17 m		
	section 4911 ▶ 0 • ; section 4912 ▶ 0 • ; section 4955 ▶ 0 •	- 5.	3.50	4
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	7	3.2
	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	40b		X
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers	2000		75.34
	or disqualified persons during the year under sections 4912, 4955, and 4958			能法
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the	1822		
	organization . D.			35
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	1. 2. 2		
	transaction? If "Yes," complete Form 8886-T	40e	L	X
41	List the states with which a copy of this return is filed. ► MN			
42 a	The organization's books are in care of ►MINNESOTA STATE BAR ASSOC. Telephone no. ► 612-33			
		540	2	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			<del></del>
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	<del></del>	Yes	
	account)?	42b		X
	If "Yes," enter the name of the foreign country:	F. 18.	32.25.	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	5	<u> </u>	
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		<u> </u>
	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	3T / 3		
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			Voc	Ne
	Did the assessment on maintain and depart advant funds? If "Vos." Farm 000 must be completed instead of	S.TX	Yes	_
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	4.75 4.75 4.4		X
45	Form 990-EZ	44	.204	
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	45	- Marie	X
	completed instead of Form 990-EZ	1	90-F7	(2009)

Form 990-EZ (2009)

Form 990-	<u> </u>			41-6023		Page 4
Part V	Section 501(c)(3) organizations and section 4 organizations and section 4947(a)(1) nonexempt chantable and 51.					
46 Did t	he organization engage in direct or indirect political campaign activities	on behalf of or in opposition to d	candidates for public		Ye	s No
	<sup>2</sup> If "Yes," complete Schedule C, Part I		, , , , , , , , , , , , , , , , , , ,	Γ	46	X
	he organization engage in lobbying activities? If "Yes," complete Sch	edule C, Part II		Ţ	47	X
	e organization a school as described in section 170(b)(1)(A)(ii)? If "Yes			Ī	48	X
49 a Did t	he organization make any transfers to an exempt non-charitable related	organization?		[	49a X	.T
<b>b</b> If "Ye	es," was the related organization a section 527 organization?				49b	X
	plete this table for the organization's five highest compensated employe \$100,000 of compensation from the organization. If there is none, enter		s, trustees and key er	mployees) who ea	ch receive	d more
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e)Ex	nt and
	NONE			compensation		
<b>51</b> Com	number of other employees paid over \$100,000 plete this table for the organization's five highest compensated independ nization. If there is none, enter "None." NONE	dent contractors who each recer	ved more than \$100,	000 of compensa	tion from 1	the
	(a) Name and address of each independent contractor paid more	than \$100,000	(b) Type of ser	vice (c	) Compens	ation
						<del></del>
d Total	number of other independent contractors each receiving over \$100,000	)	<b></b>			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accorded, and complete the clarations of presenter (other than officer) is based on all the signature of officer	companying schedules and statemen information of which preparer has any	its, and to the best of my knowledge.	y knowledge and bel 3/18/ Date	ef, it is true,	 
D-14	Type or print name and title	I Date	ali de a a le			
Paid Preparer's Use Only	Preparer's signature    172 CA   Firm's name (or yours   LAKSONALLEN   LLP		—   -	200 2940	•	str)
	it self-employed), address, and ZIP+4  220 SOUTH SIXTH STREET MINNEAPOLIS, MN 55402	, SUITE 300	Phon no.	e <b>►</b> 612-3'		00
May the IR	S discuss this return with the preparer shown above? See instructions				Yes	No (2009)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

2009
Open to Publications

Name of the organization

MINNESOTA STATE BAR FOUNDATION

Employer identification number 41-6023581

Parti	<u>⊬ Reason</u>	tor Public Chai	nty Status (All organiz	zations mu	ist comple	te this par	t.) See ins	tructions.			
The orga	e organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)										
1 🗀	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170	)(b)(1)(A)(i	).			
2 🗀	1		70(b)(1)(A)(ii). (Attach Sc					•			
з 🗔	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name.										
	city, and state:										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
J		(b)(1)(A)(iv). (Compl		inversity o	wined or o	perated by	a govern	mental un	ii aesciid	eu III	
6	1		•		al a a a <b>a</b> t-	- 470/LV	41/41/1				
7 X	7		nent or governmental uni								
/ [43			ceives a substantial part	or its supp	ort from a	governme	entai unit d	or from the	e generai	public described	ın
8	1	( <b>b)(1)(A)(vi).</b> (Comple / trust described in s	ete Part II.) section 170(b)(1)(A)(vi). I	(Complete	Part II \						
9 🗆	7		cerves. (1) more than 33			rom contr	ibutions n	nembersh	in food a	nd aross receipts	from
<u> </u>										_	
			nctions - subject to certa	-	-	•				•	
			axable income (less sect	แบกอากเล	ix) irom bi	isinesses	acquired t	by the orga	anization	arter June 30, 19	<b>75.</b>
10	1	509(a)(2). (Complete	•	ak fau mb.i	·		- 500/-1/				
10	3		perated exclusively to te								
11			perated exclusively for the						-		or
			ations described in secti				2). See <b>se</b> (	ction 509(	<b>a)(3).</b> Che	eck the box that	
			organization and comple		-				. —	1	
	a Ll Type i		· ·			tionally in	_		d∟	Type III - Other	
е 📖			at the organization is not				-		-		ın
			than one or more publicly						9(a)(1) or	section 509(a)(2).	
f	_		tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
	supporting o	rganization, check ti	his box								Ш
g	Since August	t 17, 2006, has the o	organization accepted ar	ny gift or c	ontribution	n from any	of the foll	owing per	sons?		,
	(i) A perso	n who directly or inc	lirectly controls, either al	one or tog	ether with	persons of	descnbed	ın (ii) and (	(iii) below,	Yes	No
	the gove	eming body of the s	upported organization?							11g(i)	
	(ii) A famıly	member of a perso	n descnbed in (i) above?		•••					11g(ii)	
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?		•			11g(iii)	
h	Provide the f	ollowing information	about the supported org	ganızatıon	(s).						
									_		
(i) Nam	e of supported	(ii) EIN	(iii) Type of			(v) Did yoi		(vi) Is organizatio	the ool	(vii) Amount o	f
or	ganization		organization (described on lines 1-9		sted in your		ion in col.	(i) organiz	ed in the	support	
			above or IRC section	governing	document?	(i) of you	r support?	U.S	.?		
			(see instructions))	Yes	No	Yes	No	Yes	No		
					ľ	ł		}			
							<u> </u>				
		ļ				]					
					<u> </u>						
									[		
				1							

LHA 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

932021 02-08-10

Schedule A (Form 990 or 990 EZ) 2009 MINNESOTA STATE BAR FOUNDATION 41-6023581 Page 2

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.)

Se	ction A. Public Support					<del> </del>	<del></del>
Cal	endar year (or fiscal year 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 any "unusual grants.")	561,456.	133,232.	175,931.	102,618.	113,032.	1,086,269.
2	Tax revenues levied for the organ-						
	zation's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	561,456.	133,232.	175,931.	102,618.	113,032.	1,086,269.
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)						61,208.
	Public support. Subtract line 5 from line 4	1900ab15000	thank to the time			दुर्स्तु असी ध	1,025,061.
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	561,456.	133,232.	175,931.	102,618.	113,032.	1,086,269.
8	Gross income from interest,						
	dividends, payments received on						
	secunties loans, rents, royalties						
	and income from similar sources .	47,972.	70,088.	97,759.	82,764.	18,598.	317,181.
9	Net income from unrelated business	,					
	activities, whether or not the						
	business is regularly carned 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	TOTAL TOUR	1 45 July 1480	The state of the s	デーコンドでは 変		1,403,450.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor		<u> </u>			•	<u></u> ▶∟
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2009 (	line 6, column (f) di	ivided by line 11, o	column (f))	•	14	73.04 %
	Public support percentage from 2008					15	71.32 %
16a	33 1/3% support test - 2009.If the o	rganization did not	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization	·			▶ 🛣
Ь	33 1/3% support test - 2008. If the o	rganization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	Ifies as a publicly s	supported organiz	ation			
17a	10% -facts-and-circumstances tes	-					
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and <b>stop h</b>	ere. Explain in Pa	rt IV how the organ	ızatıon
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶└
b	10% -facts-and-circumstances tes	<b>t - 2008.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, c	heck this box and	stop here. Explair	in Part IV how the	
	organization meets the "facts-and-circ		•	•			▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	and see instructions	<u>s</u> ▶ـــ
					Sche	edule A (Form 990	or 990-EZ) 2009

Pa	rt III   Support Schedule for 0	<b>Organizations</b>	Described in	Section 509(a	<b>a)(2)</b> (Complete only	rif you checked the bo	эх ол line 9 of Part I.)
Se	ction A. Public Support					•	
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				1		
	ınclude any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that				-		
_	are not an unrelated trade or bus-				-		
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
d	Add lines 7a and 7b	1					
	Public support (Subtract line 7c from line 6)		Harata and Alexander		41272	and the state	
	ction B. Total Support		•	-			
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securties loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth t	tax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here		· · ·			· · · · · · · · · · · · · · · · · · ·	▶∟_
	ction C. Computation of Publ					<del></del>	
	Public support percentage for 2009 (		•	column (f))		15	%
	Public support percentage from 2008					16	%
	ction D. Computation of Inve					<del></del>	
	Investment income percentage for 20	•		ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2009. If the						7 is not
	more than 33 1/3%, check this box a		=				. ▶□
b	33 1/3% support tests - 2008. If the	-					. $\square$
	line 18 is not more than 33 1/3%, che		-	•		_	▶⊨
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			<u> </u>
					Sc	hedule A (Form 99	u ar 990-EZ) 2009

FORM 990-EZ	OTH	ER EXPENSES			STATEMENT	1
DESCRIPTION					AMOUNT	
ADMINISTRATIVE EXPENSE	SS			•	23,41	
INVESTMENT FEES					3,44	
MISCELLANEOUS EXPENSES	5				14	18.
TOTAL TO FORM 990-EZ,	LINE 16			:	27,03	L1.
FORM 990-EZ	OTI	HER ASSETS		<u> </u>	STATEMENT	2
DESCRIPTION			BEG.	OF YEAR	END OF YEA	AR
MUTUAL FUNDS		_		722,300.	912,99	90.
INTEREST IN REMAINDER	TRUST			12,083.	42,76	
DIVIDENDS AND INTEREST	RECEIVABLE			1,544.		0.
TOTAL TO FORM 990-EZ,	LINE 24	=		735,927.	955,75	55.
FORM 990-EZ	OTHER	LIABILITIES	-		STATEMENT	3
DESCRIPTION			BEG.	OF YEAR	END OF YEA	AR
GRANTS PAYABLE		-		20,000.	15,92	20.
ACCOUNTS PAYABLE AND A		S		2,895.	3,44	
DUE TO MN STATE BAR AS	SSOCIATION	_		1,171.	1,43	31.
TOTAL TO FORM 990-EZ,	LINE 26	=		24,066.	20,79	96.
FORM 990-EZ GAIN (	(LOSS) FROM PUB	LICLY TRADED :	SECUR:	ITIES	STATEMENT	4
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS		EXPENSE OF SALE	NET GAIN OR (LOSS	)
INVESTMENTS	186,432.	191,118	•	0.	-4,68	36.
TO FORM 990-EZ, LINE 5	186,432.	191,118	<u> </u>	0.	-4,68	86.

FORM 990-EZ OTHER CHANGES IN NET ASSETS OR FO	UND BALANCES	STATEMENT	5
DESCRIPTION		AMOUNT	
UNREALIZED GAIN ON INVESTMENTS CHANGE IN VALUE-REMINDER TRUST		97,83 30,68	
TOTAL TO FORM 990-EZ, LINE 20		128,51	L6.
FORM 990-EZ CASH GRANTS AND ALLOCAS	FIONS	STATEMENT	6
CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUN	r
GENERAL OPERATING MINNESOTA JUSTICE FOUNDATION 229 S 19TH AVE MINNEAPOLIS, MN 55455	NONE	8,20	)0.
GENERAL OPERATING MINNESOTA STATE BAR ASSOCIATION 600 NICOLLET MALL, #380 MINNEAPOLIS, MN 55402	RELATED ORGANIZATION	33,39	<del>)</del> 7.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		41,59	<del></del>

FOI	FORM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		STATEMENT				7
A)	DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?			[ ]	YES	[X]	NO
B)	DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT	?.	•	[ ]	YES	[X]	NO

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STATEMENT 8

PROGRAM SERVICE ACTIVITIES CONSIST SOLELY OF GRANTS TO BOARD APPROVED ORGANIZATIONS.

THE MINNESOTA STATE BAR FOUNDATION RECOGNIZES THAT ITS EXISTENCE AND ITS ABILITY TO CARRY OUT ITS ASSIGNED MISSION ARE DUE TO THE COOPERATION AND SUPPORT THAT IT RECEIVES FROM THE MINNESOTA STATE BAR ASSOCIATION AND ITS INDIVIDUAL MEMBERS, WHO ARE THE PRIMARY SOURCE OF ALL FUNDS AVAILABLE TO THE FOUNDATION. THE FOUNDATION THEREFORE FEELS DEEPLY OBLIGATED TO PURSUE POLICIES AND MAKE GRANTS TO SUCH PROGRAMS AND CAUSES AS IT BELIEVES WOULD ATTRACT THE SPECIAL INTEREST AND SUPPORT OF THE LAWYERS OF THE STATE OF MINNESOTA.

IN AWARDING GRANTS IN RESPONSE TO WRITTEN APPLICATIONS, THE FOUNDATION BELIEVES THAT IT CAN CARRY OUT THIS BROAD OBJECTIVE BY GENERALLY ADHERING TO THE GUIDELINES STATED AS FOLLOWS:

- 1. THE FOUNDATION HAS BEEN INTERESTED IN THE PAST AND CONTINUES TO BE INTERESTED IN PROGRAMS OF LAW RELATED EDUCATION FOR STUDENTS AND ADULTS, INCLUDING, WHERE APPROPRIATE, PUBLICATIONS, WORKSHOPS, AND RELATED PROGRAMS.
- 2. THE FOUNDATION SEEKS TO ENCOURAGE AND PROMOTE LEGAL ASSISTANCE TO THE POOR AND DISADVANTAGED GROUPS.
- 3. THE FOUNDATION SEEKS TO SUPPORT AND TO PROMOTE PROGRAMS AND PROJECTS HAVING AS THEIR PURPOSE THE IMPROVEMENT OF THE ADMINISTRATION OF JUSTICE. PROVIDING INFORMATION TO THE PUBLIC SO THAT IT MIGHT BETTER UNDERSTAND THE COURTS AND LEGAL PROCESSES IS INCLUDED WITHIN THIS PURPOSE.
- 4. THE FOUNDATION WILL GIVE CONSIDERATION TO PROJECTS AND PROGRAMS SUPPORTING OR PROMOTING PUBLIC INTEREST LEGAL WORK.
- 5. THE FOUNDATION WILL, IN ALLOCATING ITS FUNDS, ATTEMPT TO MAINTAIN A PROPER BALANCE BETWEEN:
- (A) THOSE NEW AND INNOVATIVE PROGRAMS WHICH MAY BE OF AN EXPERIMENTAL NATURE AND THAT NEED ASSISTANCE IN THE FORM OF "SEED MONEY"; AND
- (B) THOSE PROJECTS OF SPECIAL CONCERN TO LAWYERS THAT ARE OF A CONTINUING NATURE AND NEED PERIODIC CONTRIBUTIONS TO THEIR OPERATING BUDGETS.
- 6. THE FOUNDATION DOES NOT PRECLUDE ITSELF FROM AWARDING GRANTS FOR SCHOLARSHIPS AND FELLOWSHIPS, BUT IT WILL STRIVE TO MAKE SUCH GRANTS PRIMARILY UNDER SUCH CIRCUMSTANCES THAT WILL PROMOTE THE GENERAL PUBLIC WELFARE RATHER THAN THE PERSONAL BENEFIT OF THE INDIVIDUAL DONEES.
- 7. SINCE CONTINUING LEGAL EDUCATION PROGRAMS FOR LAWYERS ARE, IN GENERAL, WELL SUPPORTED BY TUITION CHARGES, THE FOUNDATION FEELS OBLIGATED TO CONSIDER SUPPORT ONLY FOR SUCH CONTINUING LEGAL EDUCATION PROGRAMS THAT MAY BE OF AN EXPERIMENTAL NATURE OR OF GENERAL INTEREST TO THE ENTIRE MEMBERSHIP OF THE BAR AND ARE NOT SELF-SUPPORTING.
- 8. THE FOUNDATION DOES NOT PROVIDE FUNDS TO BE USED FOR PROPAGANDA OR LOBBYING ACTIVITIES.

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STATEMENT

HAITI RELIEF FUNDRAISER - THE FOUNDATION HELD A FUNDRAISER ON BEHALF OF THE MINNESOTA STATE BAR ASSOCIATION TO HELP OUT VICTIMS OF THE HAITI EARTHQUAKE THAT OCCURRED DURING THE YEAR ENDED JUNE 30, 2010.

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STATEMENT 10

THE MINNESOTA STATE BAR FOUNDATION IS ORGANIZED AS A MINNESOTA NONPROFIT CORPORATION FOR THE PURPOSE OF MAKING GRANTS TO PROGRAMS AND CAUSES IT BELIEVES WOULD SUPPORT THE INTEREST OF MINNESOTA LAWYERS THROUGH LAW-RELATED EDUCATION, LEGAL ASSISTANCE TO THE DISADVANTAGED, IMPROVEMENTS OF THE ADMINISTRATION OF JUSTICE, PUBLIC INTEREST LEGAL WORK AND LEGAL SCHOLARSHIPS.