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# CHANGE OF ACCOUNTING PERIOD

# **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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

A F	or the	2010 calendar year, or tax year beginning $SEP\ 1$ , $2010$ and ending	DEC 31, 2010	
Вс	heck if pplicable	C Name of organization	D Employer identifi	cation number
	Address	CAMP FIRE USA MINNESOTA COUNCIL		
	Name change	Doing Business As	41-0	706116
F	Initial	Number and street (or P.O. box if mail is not delivered to street address)  Room/si	ute E Telephone numbe	<del></del>
Ē	Termin-	3100 WEST LAKE STREET 100		285-6255
	Amende return		G Gross receipts \$	331,471.
	Applica		H(a) Is this a group re	etum
	pending		for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
1 1	ax-exe		<del> </del> ` '	list. (see instructions)
		WWW.CAMPFIREUSA-MN.ORG		n number ▶ 1409
			ear of formation: 1969 N	
		Summary		<u> </u>
<u>.</u>	1 8	riefly describe the organization's mission or most significant activities: TO PROVI	DE OPPORTUNIT	Y FOR YOUTH
Governance	1	O REALIZE THEIR POTENTIAL AND TO BE CARING,	CONFIDENT IN	DIVIDUALS.
na	_	Check this box   if the organization discontinued its operations or disposed of in	<del> </del>	
) ve		lumber of voting members of the governing body (Part VI, line 1a)	3	14
Ğ	1	lumber of independent voting members of the governing body (Part VI, line 1b)	4	14
S S		otal number of individuals employed in calendar year 2010 (Part V, line 2a)	5	26
ıtie		otal number of volunteers (estimate if necessary)	6	20
Activities &		otal unrelated business revenue from Part VIII, column (G), line 12	 7a	0.
Ā		let unrelated business taxable income from Form 990-T, IndECEIVED	7b	0.
			Prior Year	Current Year
4	8 0	contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)  Provestment income (Part VIII, column (A), lines 3, 4, and 7d)	960,194.	271,718.
Ē		Program service revenue (Part VIII, line 1h)	397,482.	20,382.
Revenue	1	nvestment income (Part VIII, column (A), lines 3,4, and 7d)	35,692.	16,638.
ď		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 Cand Filey 117	-3,499.	13,351.
	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,389,869.	322,089.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ø	1	salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	763,499.	212,742.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ď		otal fundraising expenses (Part IX, column (D), line 25)  24,655.		
மி		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	590,467.	100,858.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,353,966.	313,600.
	19 F	Revenue less expenses. Subtract line 18 from line 12	35,903.	8,489.
562			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)	1,639,716.	1,716,425.
SE SE	21 T	otal liabilities (Part X, line 26)	207,480.	201,778.
慧	22 1	let assets or fund balances. Subtract line 21 from line 20	1,432,236.	1,514,647.
Pε	rt-IIŝ	Signature Block		
Und	er penalt	ies of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		7717.1 )		
Sigi	n [	Signature of officer	Date	
Her	e	MARNIE K. WELLS, CEO	7/16/11	
	ŀ	Type or print name and title	, , ,	
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid	i	XIAOYAN LUO	5/16/11 self-employe	ed
Prep	parer [	Firm's name LARSONALLEN LLP	Firm's EIN ▶	
Use	Only	Firm's address 220 SOUTH SIXTH STREET, SUITE 300		
_		MINNEAPOLIS, MN 55402	Phone no. 6	12-376-4500
May	the IR	S discuss this return with the preparer shown above? (see instructions)		Yes No
0000	01 00 00	11 LHA For Panerwork Reduction Act Notice see the senarate instructions		Form 990 (2010)

Form	990 (2010) CAMP FIRE USA MINNESOTA COUNCIL 41-0706116 Page	<u> 2</u>
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:  CAMP FIRE USA MINNESOTA COUNCIL BUILDS CARING, CONFIDENT YOUTH AND FUTURE LEADERS.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	VО
	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?	10
_	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
4	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.  (Code:) (Expenses \$196, 983. including grants of \$) (Revenue \$16, 804)	<del>_</del>
4a	(Code: ) (Expenses \$ 196,983 · including grants of \$ ) (Revenue \$ 16,804) YOUTH CLUBS & TEENS IN ACTION CLUBS	<u>•</u> )
	CAMP FIRE'S CLUB PROGRAM FOCUSES SPECIFICALLY ON SERVING YOUTH FROM	—
		—
	FAMILIES WITH LOW INCOMES WITH LIMITED ACCESS TO YOUTH DEVELOPMENT	
	OPPORTUNITIES. WE PARTNER WITH AFFORDABLE HOUSING COMPLEXES, COMMUNITY	
	CENTERS, AND SCHOOLS TO PROVIDE FEE-FREE, YEAR-ROUND PROGRAMS WHERE	
	YOUTH LIVE AND PLAY. IN ORDER TO MAXIMIZE OUR IMPACT, WE PROVIDE HIGH	
	IMPACT PROGRAMS THAT MEET RESEARCH-BASED STANDARDS OF QUALITY.	
	YOUTH CLUBS ARE SMALL GROUPS OF YOUTH AGES 5-12 WHO LEARN ABOUT	
	THEMSELVES, THEIR COMMUNITIES, AND THE ENVIRONMENT. TEENS IN ACTION	
	CLUBS ENGAGE YOUTH AGES 13-18 IN SERVICE-LEARNING PROJECTS AND	
	LEADERSHIP DEVELOPMENT ACTIVITIES. BETWEEN SEPTEMBER 1, 2010 AND	
	DECEMBER 31, 2010, WE SERVED 319 YOUTH THROUGH OUR CLUB PROGRAM; 90% O	F
4b	(Code ) (Expenses \$ 42,882. including grants of \$ ) (Revenue \$ 3,658	• )
	OUTDOOR PROGRAM	
	OUR CAMP PROGRAM ENGAGES YOUTH WITH THE OUTDOORS AND PLACES A HEAVY	
	EMPHASIS ON PROVIDING ACCESS TO NATURE FOR INNER-CITY THROUGH	_
	CLUB-TO-CAMP FIELD TRIPS AND CAMP SCHOLARSHIPS. OUR SUMMER CAMP PROGRAM	M
	INCLUDES DAY CAMP, OVERNIGHT CAMP, NORTHWOODS ADVENTURE TRIPS, AND	_
	LEADERSHIP SESSIONS. BY PARTICIPATING IN OUTDOOR PROGRAMMING, YOUTH	_
	EXPERIENCE HEALTHY ACTIVITIES; DISCOVERY THROUGH EXPERIENTIAL	—
	EDUCATION; SERVICE TO THE ENVIRONMENT; AND GROWTH.	
	BOCKITON, BERVICE TO THE ENVIRONMENT, THE CROWLER	
		—
	) (Daywood)	• )
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$0	<u>•</u> }
4d	Other program services. (Describe in Schedule O.)	
70	(Expenses \$ Including grants of \$ ) (Revenue \$ )	
45	Total program service expenses ► 239,865.	—
<u>4e</u>	Form 990 (20	10\
กรรณ		. 57

Form 990 (2010) CAMP FIRE US

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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
·	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X	17.25	<u>AR</u>	
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	L
b	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? If "Yes," complete Schedule D, Part VII	11b		X
c	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 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	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? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	<u> </u>	X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	<b> </b> -	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148	-	
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? If "Yes," complete Schedule F, Parts I and IV	14b		X
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	<del>                                     </del>	<del>                                     </del>	
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		ļ —	
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	L	X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that		1	
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
		F-0	agn	(2010)

Pa	TIV 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,			<b>†</b>
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
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		Х
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	1		
	Schedule K. If "No", go to line 25	24a		Х
b	The state of the s	24b		-
G	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
2.50	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	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	·	х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L., Part IV	<u> श्रिक्त</u>	*****	ner E
	instructions for applicable filing thresholds, conditions, and exceptions):		STATE OF	
а	Control of the Asset of the Ass	28a	-	X
b	se un la complete Cohadula I Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	İ	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?		1	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X	<u> </u>
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	l		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	If "Yes," complete Schedule R, Part V, line 2	36	L	X
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?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990 (	(2010)

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CAMP FIRE USA MINNESOTA COUNCIL

Pa	Check if Schedule O contains a response to any question in this Part V				$\Box$
		· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		12 E	##T.
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	T.		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c		
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	2a 26			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ms?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	s)		333	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authonty over, a		ŀ	
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country:				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.		1,22,00	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	iction?	5b	<u> </u>	Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne organization solicit			
	any contributions that were not tax deductible?		6a		X
b	if "Yes," did the organization include with every solicitation an express statement that such contribute	tions or gifts		i l	1
	were not tax deductible?		6b		24322
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required		i l	v
	to file Form 8282?		7c	37% . 021	X
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d	153		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	<u>=</u>	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization according to the organizations of cars, boats, airplanes, or other vehicles, did the organizations of cars, boats, airplanes, or other vehicles, did the organizations of cars, boats, airplanes, or other vehicles, did the organizations of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, did the organization of cars, air		7h	15.5° 1	200
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		.536.	FEL	L VE
_		any time during the year	8	5542	ينو پيما تواور
9_	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?		463E	61811814	*****
a	Did the organization make a distribution to a donor, donor advisor, or related person?	• • •	9a 9b		<del></del>
10	Section 501(c)(7) organizations. Enter		30 32 32 33	الله الله الله الله الله الله الله الله	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		10 T	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			1
11	Section 501(c)(12) organizations. Enter:				2
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			蕓	
_	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	<del></del>	12a	*Palancia de	CALLEGE C.
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		432	11.5° 15' 15
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	•	1	75 TE.	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			湿捷	
	organization is licensed to issue qualified health plans	13b		(第	
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		
			Form	990 (	2010)

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  1a. Enter the number of voting members of the governing body at the end of the tax year		Check if Schedule O contains a response to any question in this Part VI			X
1a Enter the number of voting members of the governing body at the end of the tax year  b Enter the number of voting members included in line 1a, above, who are independent  1	Sec	tion A. Governing Body and Management			
b Enter the number of voting members included in line 1a, above, who are independent 1. 14				Yes	No
Did any officer, director, trustee, or key employee have a farmly relationship or a business relationship with any other officer, directors, trustee, or key employees to a management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  3	1a			J. 33	
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11a Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form?  b 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  b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflict?  c Does the organization regularly and consistently monitor and enforce compliance with the policy? If *Yes,* describe in Schedule O how this is done  12b X  12c X  13 X  14 Does the organization have a written whistleblower policy?  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  b Other officers or key employees of the organization  If *Yes* to line 15a or 15b, describe the process in Schedule O. (See instructions.)  15a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶MN  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	b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
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20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
		statements available to the public.			
MARNIE WELLS - 612-285-6255	20		tion: 🕨	·	
		MARNIE WELLS - 612-285-6255			
3100 WEST LAKE STREET, NO. 100, MINNEAPOLIS, MN 55416		3100 WEST LAKE STREET, NO. 100, MINNEAPOLIS, MN 55416			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

X

### 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.
- 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, if any. 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.

Lickethis box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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 such persons.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per	1,6		Position neck all that apply)				Reportable compensation	Reportable compensation	Estimated amount of
	week (describe hours for related organizations in Schedule O)	ustee or director	Institutional trustee	2			from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
WILLIAM SLOWTER			Ī		Г					
PRESIDENT	1.00	X		Х	L	<u> </u>		0.	0.	0.
RANDY FELCH					ĺ		{	ſ		
VICE PRESIDENT	1.00	X		Х	L.	<u> </u>		0.	0.	0.
MEG ROY										
SECRETARY	1.00	X		Х	<u> </u>		L	0.	0.	0.
SUSAN BYRNES		Ι	Τ	[						
TREASURER	1.00	X		Х				0.	0.	0.
JADE JOHNSON		$I^-$	Ī							
BOARD MEMBER	1.00	X						0.	0.	0.
JANE LEONARD										
BOARD MEMBER	1.00	X						0.	0.	0.
KELLEY LOUGHREY							ļ			
BOARD MEMBER	1.00	Х						0.	0.	0.
TERESA MCALPINE							ł			
BOARD MEMBER	1.00	X	<u> </u>			L	<u></u>	0.	0.	0.
PAUL MORTELL										
BOARD MEMBER	1.00	X	L			<u>L.</u>	_	0.	0.	0.
DANA OLSEN										-
BOARD MEMBER	1.00	X				<u>L</u>		0.	0.	0.
JOHN REICH							ľ	Ì		-
BOARD MEMBER	1.00	X		L.		1		0.	0.	0.
PADY REGNIER		1					ŀ			
BOARD MEMBER	1.00	X			Ш			0.	0.	0.
STEFANIE TUCKER	1	1			ļ	j .	)	1		
BOARD MEMBER	1.00	X	<u> </u>			<u> </u>	L	0.	0.	0.
SUSAN WILLIAMS			1							
BOARD MEMBER	1.00	X	1_		L	<u> </u>	<u> </u>	0.	0.	0.
ALEXANDRA WINCELL										
BOARD MEMBER	1.00	X	_	<u></u>	_	_	匚	0.	0.	0.
MARNIE K. WELLS				1		1				
CEO	38.00	<u> </u>	_	X	_	<u> </u>		96,811.	0.	13,018.
			1							
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Form 990 (2010)

Section A. Officers, Directors	, Trustees, Key E	npic	yee	s, a	na	nıgn	est	Compensated Employ	ees (continueu)			
(A)	(B)				(D)	(E)	(E)		(F)			
Name and title	Average					1		Reportable	Reportable	e Estimated		
	hours per	(cr	neck	all t	that	арр	ly)	compensation	compensation			ount of
	week	ē						from	from related			ther
	(describe hours for	Individual trustee or director				, g		the organization	organizations (W-2/1099-MIS			ensation m the
	related	9	stee		ŀ	Susali	i	(W-2/1099-MISC)	(44-27 1055-14110	۷, ۱		nization
	organizations	frus	nal tru		a A	e e		(11 2 1000 111100)			-	related
	in Schedule	g	Institutional trustee	<b>1</b> 5	Key employee	Highest compensated employee	<b>Р</b> огтег					ızatıons
	O)	Indi	Inst	Officer	č.	H E	Š				_	
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		Н										
						1						
1b Sub-total	I	ш			<u> </u>			96,811.		0.	13	,018.
c Total from continuation sheets to Pa	rt VII Section A				•			0.		0.		0.
d Total (add lines 1b and 1c)	it vii, Section A		•		•			96,811.		0.	13	,018.
	out not limited to th	2000	liete	d al	bov	a) 14t	10 r	<del></del>	000 in reportable			70201
2 Total number of individuals (including to compensation from the organization)		1036	iisto	u ai	UUV	C) WI	10 10	eccived more than proc	,,000 iii reportabit	-		1
compensation from the organization											TY	es No
3 Did the organization list any former off	icer director or tru	etee	kov	, em	nlo	Vee	or h	nahest compensated er	nnlovee on	Γ		
3 Did the organization list any former off line 1a? If "Yes," complete Schedule J			, nej	CII	ipio	ycc,	0. 1	ngriest compensated cr	iipioyee on	ľ	3	X
			mn	anes	atioi	anc	t oti	 her compensation from	the organization	ŀ	20 E A	
4 For any individual listed on line 1a, is the and related organizations greater than									uic organization	ľ	1838F 15	X
									dual for senuces	ŀ	1454 4	
5 Did any person listed on line 1a receive rendered to the organization? If "Yes,"							Clat	ed organization or indivi	dual for screecs		5	X
Section B. Independent Contractors	complete deneau	<i>C U N</i>	01 30	1011	pc,	30,,						
Complete this table for your five higher	st compensated in	dene	nde	nt c	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation fro	 .m
the organization. NONE	st companioated in	оорс		0					<b>4</b> 100,000 01 00	<b>P</b> -1.0.		
(A)							Т	(B)			(C)	
Name and busi								Description of s	ervices	C	ompens	
		-					$\dashv$					
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									1			
	·											
							-					
	· · · · · · · · · · · · · · · · · · ·						$\dashv$					
								-				
									1			
2 Total number of independent contract	ors (including but r	of h	mite	d to	thr	se le	sted	d above) who received m	ore than		<del>Desiral</del>	
\$100,000 in compensation from the or				0		0						
wroopood in compensation from the or	3_1,						_				Form 9	<b>90</b> (2010)
												_ (,

ĽРа	rt VII	Statement of Rever	nue					
では、					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ស្ស	1 a	Federated campaigns	1a	3,029.				
투질	ь	Membership dues	1b					
S, G	С	Fundraising events .	1c	17,210.				
불	d	Related organizations .	1d	188,000.				
Contributions, gifts, grants and other similar amounts	e	Government grants (contribut	ions) 1e					
흘	f	All other contributions, gifts, gran	ts, and					
들		similar amounts not included abor	ve <b>1f</b>	63,479.				
털	g	Noncash contributions included in lines	1a-1f \$	2,353.				
OB	h	Total. Add lines 1a-1f	<del></del>		271,718.		THE STREET STREET	Company of the second second
		ar iin need		Business Code	16,804.	16,804.		
<u>ခို</u>	2 a	CLUB FEES CAMP FEES		900099	3,578.	3,578.		
le g	b	CAMP FEES		300033	3,376.	3,376.		
Ne a	С.			-				
Pa Ba	a					<del></del>		
Program Service Revenue	e 4	All other program service reve	<u>-</u>					
	q	Total. Add lines 2a-2f		<b></b>	20,382.	Signar singapia.		te build for a
	<u>_</u>	Investment income (including	dividends, inter	<del></del>			12.5	
	_	other similar amounts)		· <b>&gt;</b>	16,638.			16,638.
	4	Income from investment of tax	x-exempt bond	proceeds >				
	5	Royalties		<b>&gt;</b>				
			(i) Real	(ii) Personal	The state of the s			
	6 a	Gross Rents						
	b	Less: rental expenses						
	С	Rental income or (loss)	L	J	The second secon		and the field the course of th	
		Net rental income or (loss)		<b>_</b>	they be their oracle to have	and the partition of the	satemana and Court	ina ensiren zaustruara
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
- 1	_	assets other than inventory		<del> </del>				
	ь	Less: cost or other basis						
	_	and sales expenses						
		Gain or (loss)  Net gain or (loss)		<b></b>		de Torre de la companya de la compa	HINNEY THANK TOOK .	FO very little to be and fine a
		Gross income from fundraisin	a events (not	<u> </u>		912778786		्रिकेटनयर्ने तंत्रक रोगीकर्ष
Other Revenue	<b>u</b> u		210. of					
8		contributions reported on line						
2		Part IV, line 18						
푩	ь	Less. direct expenses	Ł	9,382.				
٦	С	Net income or (loss) from fund	draising events		5,719.			5,719.
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	a	·	The state of the s			
	b	Less direct expenses	t					
	С	, , -	-	<u> </u>	Carried and the first and the	A Committee of Com	Theretical states as forther	A Secretary State of the Secretary State of t
ĺ	10 a	Gross sales of inventory, less		80.				
İ		and allowances						
		Less: cost of goods sold  Net income or (loss) from sale		, r	80.	80.	Carlotte of the second	
		Miscellaneous Revenu		Business Code		arre establic		
	11 a	MEGODI E ANTROMO		900099	7,552.	The section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the se	and the control of the second	7,552.
ļ	b				1			,
	6				<u> </u>			
	d	All other revenue	<del></del>					
	е				7,552.	AND THE PROPERTY OF THE	THE GENERAL	and the state of
	12	Total revenue. See instructions.			322,089.	20,462.	0.	29,909.
03200 12-21	09 I-10							Form <b>990</b> (2010)

# Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	te columns (B), (C), and (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			Terminika	
_	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	29,632.	16,988.	6,322.	6,322.
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 salanes and wages	161,287.	144,265.	9,164.	7,858.
8	Pension plan contributions (include section 401(k)				·
-	and section 403(b) employer contributions)	4,972.	4,181.	413.	378.
9	Other employee benefits	4,972.	4,181. 2,017.	628.	575.
10	Payroll taxes	13,631.	11,464.	1,131.	1,036.
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	12,873.		12,873.	
d					
e	Professional fundraising services. See Part IV, line 17		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	The rest of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the	
f	Investment management fees				
g	Other	17,436.	7,393.	8,055.	1,988.
12	Advertising and promotion	2,451.	1,676.		775.
13	Office expenses	6,231.	5,863.	206.	162.
14	Information technology	1,553.		1,553.	
15	Royalties				
16	Occupancy	23,291.	21,474.	955.	862.
17	Travel	2,766.	2,766.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		-		
20	Interest	2,764.		2,764.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,760.	5,433.	2,846.	3,481.
23	Insurance	16,481.	13,910.	1,368.	1,203.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
	amount, list line 24f expenses on Schedule 0.)				
а	שמאת תגת	1,003.	1,003.		
b	PROGRAM SUPPLIES	899.	899.		
С	STAFF DEVELOPMENT	549.	343.	206.	
d	MISCELLANEOUS EXPENSES	512.		512.	
e	DILEC AND CHECOTOTIONS	289.	190.	84.	15.
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	313,600.	239,865.	49,080.	24,655.
26	Joint costs. Check here I If following SOP				
	98-2 (ASC 958-720). Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

032010 12-21-10

Form 990 (2010)

Pa	rt X≝	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	62,286.	1	108,995.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	155,355.	3	105,285.
	4	Accounts receivable, net	8,794.	4	13,452.
	5	Receivables from current and former officers, directors, trustees, key	Paragraphic process.		
		employees, and highest compensated employees. Complete Part II		-	
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section		, , , , , , , , , , , , , , , , , , ,	Carried To the Carried Carried
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		100 m	
"	ł	employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	15,282.	8	17,959.
	9	Prepaid expenses and deferred charges	9,532.	9	17,807.
	10a	Land, buildings, and equipment cost or other		(3500)	
	ł	basis. Complete Part VI of Schedule D 10a 1,396,176.		100	
	Ь	Less: accumulated depreciation 10b 679,323.	726,521.	10c	716,853.
	11	Investments - publicly traded securities	CC1 04C	11	926 054
	12	Investments - other securities. See Part IV, line 11	661,946.	12	736,074.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1 (20 716	15	1 716 425
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,639,716. 207,480.	16	1,716,425. 148,062.
	17	Accounts payable and accrued expenses	407,400.	17	140,004.
	18	Grants payable		18	53,716.
	19	Deferred revenue		19 20	33,710.
	20	Tax-exempt bond liabilities		21	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21 3553	Delegation and applica
₽	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
Lia		of Schedule L		22	th and the first and the first the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of
	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		25	
	26	Total liabilities. Add lines 17 through 25	207,480.	26	201,778.
		Organizations that follow SFAS 117, check here X and complete			
ģ		lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	527,040.	27	559,037.
ala	28	Temporanly restricted net assets	243,250.	28	219,537.
D E	29	Permanently restricted net assets	661,946.	29	736,073.
풀		Organizations that do not follow SFAS 117, check here   and		Kitt Hitt	
<u>5</u>	1	complete lines 30 through 34.			The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
ets	30	Capital stock or trust principal, or current funds .		30	
\ss	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	1,432,236.	33	1,514,647.
	34	Total liabilities and net assets/fund balances	1,639,716.	34	1,716,425.
			<del></del>		Form <b>990</b> (2010)

Form	990 (2010) CAMP FIRE USA MINNESOTA COUNCIL 4	1-0706	5116	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)				89.
2	Total expenses (must equal Part IX, column (A), line 25)				00.
3	Revenue less expenses. Subtract line 2 from line 1	1			89.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		L,432		
5	Other changes in net assets or fund balances (explain in Schedule O) 5				22.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6	1	L,514	, 64	<u>47.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u></u>			<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990.   Cash X Accrual Other		23 1 4		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		13.T.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the at	ıdıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu	le O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued or	١a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			a chi	
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	1		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	audıt		- 1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form 9	90 (2	2010)

# SCHÈDULE 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.

OMB No 1545-0047 **2010**Open to Public

Inspection

Name of the organization

Employer identification number

		CAMP FI	RE USA MINNE	SOTA	COUNC	!IL			4:	1-0706116
Part; 13	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.		
The organ	ization is not a	private foundation	because it is (For lines	1 through	11, check	only one t	oox.)			
1 🗔			s, or association of chur					).		
2 🔲	A school des	cnbed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🛄	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).			
4 🗀	A medical res	search organization	operated in conjunction	with a hos	pital desc	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter t	he hospital's name,
	city, and stat									
5 📖	An organizat	on operated for the	benefit of a college or u	niversity ov	wned or op	perated by	a govem	mental uni	t describe	ed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6 🖳	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d ın sectio	n 170(b)(	1)(A)(v).			
7 LX	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general	public described in
		<b>b)(1)(A)(vi).</b> (Comple	•							
8 🖳	-		ection 170(b)(1)(A)(vi).							
9	•	-	eives (1) more than 33							
			nctions - subject to certa							
			axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired E	y the orga	inization a	after June 30, 1975.
40 [		509(a)(2). (Complete	•	_4	aafab. (		- F00/-\/	4		
10	_	•	perated exclusively to te perated exclusively for the						v out the	numeron of one or
11	-	-	itions described in secti							
			organization and compl				.). Occ <b>se</b> (	JEIOH 303(	a)(3). One	CK the DOX that
	a Type					tionally inf	tegrated		аШ	Type III - Other
e 🗀			t the organization is not	,,		,	_	r more disc		•
-	-		han one or more publicly							
f		-	ten determination from		_					( // /
		rganization, check th			-					
g		_	rganization accepted ar	ny gift or co	ontribution	from any	of the foll	owing pers	sons?	
			rectly controls, either al							Yes No
	the gove	eming body of the si	upported organization?							11g(i)
	(ii) A family	member of a persor	n described in (i) above?	•				••		11g(ii)
	(iii) A 35% (	controlled entity of a	person described in (i)	or (ii) above	e?					11g(iii)
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).					
		·	1.90 Topo of	T		T		1 (8)	a .	<del></del>
(i) Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did you		Torganizatio	on in col. [	(vii) Amount of
orga	anization		(described on lines 1-9	in col. (i) la	document?		ion in col.	(i) organız U.S	ed in the	support
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
	<del>-</del>	<del> </del>	(acc managama))	163	140	163	140	165	'	
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		<del> </del>		<del> </del>				<del>                                     </del>		
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 CAMP FIRE USA MINNESOTA COUNCIL 41-07062

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
0a16	Gifts, grants, contributions, and	(4) 2000	(0) 2007	(0) 2000	(4) 2000	(0) 20 10	(1) 10001
٠	membership fees received. (Do not						
	include any "unusual grants.")	507,277.	653,964.	1,029,514.	960,194.	218,718.	3,369,667.
2	Tax revenues levied for the organ-	30,72,,,	000,2000	_, ,		,	
2	zation's benefit and either paid to						
	or expended on its behalf						
2	The value of services or facilities		-				·
3	fumished by a governmental unit to						
	the organization without charge	'					
4	Total. Add lines 1 through 3	507,277.	653,964.	1,029,514.	960,194.	218,718.	3,369,667.
5	The portion of total contributions	FINANCE EX	TO THE WAY TO STATE	TERRETTE STEEL	Marian Charles	die de Beienstein	, , , ,
3	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)						443,188.
•	Public support. Subtract line 5 from line 4	mental and the party of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the sta					2,926,479.
	ction B. Total Support	Carlo assets are an	Later resistant in Substrate Trans	Sar Sar Las Zeas.	#400 Your L #22 10 1920 Y	100001111111111111111111111111111111111	_,===,===
	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	507,277.	653,964.	1,029,514.	960,194.	218,718.	3,369,667.
	Gross income from interest,	30772773	033/3010	.,,	200,222		, , , , ,
8	dividends, payments received on	İ					
	securities loans, rents, royalties and income from similar sources	47,541.	47,958.	52,858.	35,856.	16,638.	200,851.
_	Net income from unrelated business	17,5111	1,7550	32,030			
9	•			•			
	activities, whether or not the						
40	business is regularly carried on		·				
10	Other income. Do not include gain						
	or loss from the sale of capital		20,569.		548.	7,552.	28,669.
	assets (Explain in Part IV.)	area era alemañ alorr	48-3-47 (40\$-786)	And willing the	Secretaria di Se	47547FEEEE	3,599,187.
	Total support. Add lines 7 through 10	eta (eca metricti	020)	THE PROPERTY OF THE PARTY OF TH	Com hardinara arreade.	12 1	,791,515.
12	Gross receipts from related activities, First five years. If the Form 990 is for			d fourth or fifth to		<del></del>	7.3273231
13			s ilist, second, tili	u, loaren, or men e	ax year as a section	11 30 1(0)(0)	ightharpoonup
Sec	organization, check this box and stop etion C. Computation of Publ	ic Support Pe	rcentage	· · ·		•• •	
	Public support percentage for 2010 (			column (fl)		14	81.31 %
14	Public support percentage for 2010 ( Public support percentage from 2009)	• • • • • • • • • • • • • • • • • • • •	-	~.u (1))	••	15	81.05 %
15	33 1/3% support test - 2010.If the o			line 13, and line 1	14 is 33 1/3% or m	<del></del>	
102	stop here. The organization qualifies				3 55 1/5/6 5/11	, G	<u> </u>
L	33 1/3% support test - 2009.If the o		-		 line 15 is 33 1/3%	or more, check th	• • •
Ľ	and stop here. The organization qual					5. 111010, G1100K III	<b>▶</b> □
47-	and stop nere. The organization qual  10% -facts-and-circumstances tes					and line 14 is 1∩% .	or more
1/2	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					ale organ	<b></b>
	10% -facts-and-circumstances tes	_	•		=	  7a_and line 15 is :	10% or
r	more, and if the organization meets to						
	_						<b>`</b>
40	organization meets the "facts-and-circ Private foundation. If the organization						
18	Private foundation. If the organization	on did not check a	DOX OF HISE 13, 10	a, 100, 1/a, 01 1/1		edule A (Form 990	
					Cin		

# Schedule A (Form 990 or 990-EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	olow, produce com	p. 0.0 ,				
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include 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 business under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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						
c Add lines 7a and 7b	i demonstration of	ne can graf the saids	er is independent virustes, franceit	Company and State of the State of	e todaya nodaharinga t	
8 Public support (Subtract line 7c from line 6) Section B. Total Support		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	A THE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE			
Calendar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Amounts from line 6      Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		•				
<b>b</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 carned 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)	the organization!	e first second this	d fourth or fifth to	1	on 501/c)/2\ aras==	ation
14 First five years. If the Form 990 is fo	me organization's	s arsı, secono, ının	u, rouras, of mus t	an year as a secti	on so regarita	auori,
check this box and stop here Section C. Computation of Publ	ic Support Pa	rcentage	····	<del></del>		
15 Public support percentage for 2010 (			column (f)		15	9
16 Public support percentage from 2009	,	•			16	. <u></u>
Section D. Computation of Inve			··_	- · · · · · · · · · · · · · · · · · · ·	1.10	
17 Investment income percentage for 20			e 13. column (fl)		17	9
18 Investment income percentage from	•	• •		••	18	
19a 33 1/3% support tests - 2010. If the	•		on line 14, and line	e 15 is more than		
more than 33 1/3%, check this box a	-				<u>-</u>	<b>▶</b>
b 33 1/3% support tests - 2009. If the						und
line 18 is not more than 33 1/3%, che						

Schedule A (For Part IV Su and	pple	mental I	nform	ation. C	omplete	this part t	o provide the ional informat	explanat	tions require	d by Part II, lines).	e 10, Part II, lir	ne 17a or 17b;
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## SCHEDULE D

(Form 990)

Department of the Treasury

# 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 Open to Public Inspection \*

Internal Revenue Service Employer identification number Name of the organization CAMP FIRE USA MINNESOTA COUNCIL 41-0706116 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part Iorganization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year ... 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year ... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Ves and section 170(h)(4)(B)(ii)? 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 (ASC 958), 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 (ASC 958), 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 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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Schedule D (Form 990) 2010

Sche		RE USA MIN				-0706116 Page 2
Pai	Organizations Maintaining C					
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of the	e following that are	a significant use	of its collection items
	(check all that apply):					
а	Public exhibition	c		change programs		
b	Scholarly research	e	e L Other			
С	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization's	exempt purpose	n Part XIV.
5	During the year, did the organization solicit of	or receive donations	of art, historical trea	asures, or other sil	milar assets	
	to be sold to raise funds rather than to be ma					Yes No
Pai	t/IV Escrow and Custodial Arran	gements. Compl	ete if the organizati	on answered "Yes	* to Form 990, Pa	rt IV, line 9, or
<del></del>	reported an amount on Form 990, Pa					
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contributio	ns or other assets	not included	
	on Form 990, Part X?		•			Yes No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:			•
-	, <b></b> ,,,,,,		<b>J</b>			Amount
С	Beginning balance				1c	
	Additions during the year				1d	
u					1e	
e	Distributions during the year	•	•		1f	
Ţ	Ending balance			-	<u> </u>	Yes No
	Did the organization include an amount on F		:217 .			Tes LINO
	If "Yes," explain the arrangement in Part XIV			000 D-+ IV I	10	<del></del>
Pai	Endowment Funds. Complete					hadal a stranger hada
		(a) Current year	(b) Pnor year	(c) Two years bac	k (d) Three years	back (e) Four years back
1a	Beginning of year balance				The second of the second	Print The Color and and it have a
b	Contributions		<u> </u>	<b>_</b>	The State of the Landson	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
С	Net investment earnings, gains, and losses			ļ	The second second	
d	Grants or scholarships					FREE BURNEY
е	Other expenditures for facilities					
	and programs					The case and advantage of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the case of the
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g	End of year balance					THE PROPERTY.
2	Provide the estimated percentage of the year	ir end balance held a	as			
а	Board designated or quasi-endowment		_%			
b	Permanent endowment	%	_			
С	Term endowment	%				
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administered t	for the organization	n
	by:	-			_	Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(ii)
h	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedule R?		•	3b
4	Describe in Part XIV the intended uses of the				•	. [52]
Par	tVI Land, Buildings, and Equipm				<del></del>	
1 <sub>2</sub> Cal	Description of investment	(a) Cost or o		t or other (	c) Accumulated	(d) Book value
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	Leasehold improvements		<del></del>	77 523	221 000	AC 533
d	Equipment			77,533.	331,000	
	Other	L		13,775.	36,932	
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line	10(c))	<u> </u>	716,853.

Schedule D (Form 990) 2010

Par	(a) Description of security or category		?. 	(c) Method of valua	tion
	(including name of security)	(b) Book value		Cost or end-of-year man	
	inancial derivatives				
	Closely-held equity interests				
(3) C	other  A) BENEFICIAL INTEREST IN				
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	(Col (b) must equal Form 990, Part X, col (B) line 12.)  1 VIII Investments - Program Related. Se			post of the man delivery and the	gassacsiga Estabaga Estatus etterin a villa
Par			3. 	(c) Method of valua	tion:
	(a) Description of investment type	(b) Book value	}	Cost or end-of-year mark	
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	rt IX: Other Assets. See Form 990, Part X, line	15.			
	(a) [	Description			(b) Book value
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	rt X Other Liabilities. See Form 990, Part X, I	line 25.	(b) Amount	Charles to commission of process of the commission of the	
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(1	I) I. (Column (b) must equal Form 990, Part X, col (B) line	25)			
	IN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to	the organization's tinancial statem	nents that reports the c	rganization's liability for uncerta	in tax positions under
03205 12-20				Sch	edule D (Form 990) 2010
		2.2			

	dule D (Form 990) 2010 CAMP FIRE USA MINNESOTA COUNCIL			age 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial S	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments	4		
5	Denoted assumes and use of feedbase	5		
6	Investment expenses	6		
		7		
7	Prior period adjustments	<del>- 1</del>		
8	Other (Describe in Part XIV.)	8	·	
9	Total adjustments (net). Add lines 4 through 8	9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	on Datama	
Par	t XII: Reconciliation of Revenue per Audited Financial Statements With Reve	nue p		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments		ST TO LOW	
b	Donated services and use of facilities			
C	Recoveries of prior year grants 2c			
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		Tabil Tabil	
а	Investment expenses not included on Form 990, Part VIII, line 7b		عرائية الأمرانية	
b	Other (Describe in Part XIV.)		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses	per Return	
1	Total expenses and losses per audited financial statements		<u> </u>	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
-	Donated services and use of facilities 2a		200 Car	
h				
b				
C				
d				
e	Add lines 2a through 2d	•	.   2e	
3	Subtract line 2e from line 1		. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
	t XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	ert IV, lu	nes 1b and 2b; Part V, line 4, l	Part
X, line	e 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to pro	vide ar	ny additional information.	
			<del></del>	

# SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

2010

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

**Employer identification number** Name of the organization CAMP FIRE USA MINNESOTA COUNCIL 41-0706116 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events ☐ In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts have custody or control of contributions? (ii) Activity to (or retained by) fundraiser from activity or entity (fundraiser) organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

032081 01-13-11

Schedule G (Form 990 or 990-EZ) 2010

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2010

032082 01-13-11

Schedule G (Form 990 or 990-EZ) 2010 CAMP FIRE USA MINNESOTA COUNCIL 41-0706116 Page 3
11 Does the organization operate gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
to administer charitable gaming?
13 Indicate the percentage of gaming activity operated in:
a The organization's facility
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.
Name ▶
Address >
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount
of gaming revenue retained by the third party > \$
c If "Yes," enter name and address of the third party:
Name >
Address >
16 Gaming manager information:
Name
Gaming manager compensation ▶ \$
Description of services provided
Director/officer Employee Independent contractor
17 Mandatory distributions
a Is the organization required under state law to make charitable distributions from the gaming proceeds to
retain the state gaming license?
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year 🕨 \$
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
032083 01-13-11 Schedule G (Form 990 or 990-EZ) 2010

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

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization

CAMP FIRE USA MINNESOTA COUNCIL

Employer identification number 41-0706116

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

WHOM FELL BELOW 200% OF THE POVERTY LINE. CLUB PARTICIPANTS ARE

ETHNICALLY DIVERSE: 44% AFRICAN; 36% AFRICAN AMERICAN; 1% HISPANIC; 8%

MULTI-RACIAL; 5% CAUCASIAN; 5% ASIAN; AND 1% AMERICAN INDIAN. AS A

RESULT OF PARTICIPATION, YOUTH GAIN ACADEMIC AND SOCIAL SKILLS THAT

PREPARE THEM FOR THE FUTURE.

FORM 990, PART VI, SECTION A, LINE 1: THE EXECUTIVE COMMITTEE IS FORMED

OF THE BOARD PRESIDENT, VICE-PRESIDENT, TREASURER, AND SECRETARY. THE

SCOPE OF THE COMMITTEE'S AUTHORITY IS TO HAVE THE AUTHORITY TO 1) REVIEW

THE CEOS ANNUAL PERFORMANCE AND COMPENSATION PACKAGE AND 2) REVIEW AND

BRING FORTH TO THE BOARD DECISIONS THAT ARE MADE OR NEED TO BE MADE BASED

ON HIGH LEVEL DISCUSSION AND DECISIONS SUCH AS A CONFLICT OF INTEREST

DISCLOSURE.

FORM 990, PART VI, SECTION A, LINE 6: MEMBERSHIP IN CAMP FIRE USA
MINNESOTA COUNCIL IS OPEN TO ALL YOUTH AND ADULTS PARTICIPATING IN CAMP
FIRE USA PROGRAMS, PERSONS INVOLVED IN DELIVERING SUCH PROGRAMS,
ADMINISTRATIVE VOLUNTEERS AND MEMERS-AT-LARGE.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE REVIEWED AND APPROVED THE 2010 FORM 990 FOR THE SHORTENED YEAR WITH A CHANGE IN ACCOUNTING PERIOD. DUE TO TIME CONSTRAINTS, THE FULL BOARD WAS NOT PROVIDED THE FORM TO VOTE FOR APPROVAL AS THE NORMAL PROCEDURE CALLS FOR.

HOWEVER, CEO REVIEWS AND APPROVES FORM 990 TO BE SUBMITTED. BOARD PRESIDENT AND MEMBERS WILL RECEIVE A COPY OF THE FORM 990 TO REVIEW AFTER THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)

Employer identification number 41-0706116

COMPLETION OF FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS, TRUSTEES OR

STAFF ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST DISCLOSURE.

ALL ACTUAL AND POTENTIAL CONFLICTS OF INTERESTS SHALL BE DISCLOSED BY BOARD

MEMBERS, TRUSTEES OR STAFF TO THE MN COUNCIL EXECUTIVE COMMITTEE THROUGH

THE ANNUAL DISCLOSURE FORM AND/OR WHENEVER A CONFLICT ARISES. THE

DISINTERESTED MEMBERS OF THE MN COUNCIL EXECUTIVE COMMITTEE SHALL MAKE A

DECISION AS TO WHETHER A CONFLICT EXISTS AND WHAT SUBSEQUENT ACTION IS

APPROPRIATE(IF ANY). THE MN COUNCIL EXECUTIVE COMMITTEE SHALL INFORM THE

BOARD OF SUCH DETERMINATION AND ACTION, AND SHALL RETAIN THE ULTIMATE

ENFORCEMENT AUTHORITY WITH RESPECT TO THE INTERPRETATION AND APPLICATION OF

FORM 990, PART VI, SECTION B, LINE 15A: ALL POSITIONS AT CAMP FIRE USA ARE REVIEWED IN COMPARISON TO THE ANNUAL RELEASE OF THE MINNESOTA COUNCIL OF NONPROFIT'S SALARY AND BENEFITS SURVEY. CAMP FIRE ATTEMPTS TO FAIRLY COMPENSATE ALL EMPLOYEES BASED ON RESPONSIBILITIES AND ROLE AT THE ORGANIZATION.

THE BOARD PRESIDENT REVIEWS AND DETERMINES THE CEO'S COMPENSATION BASED ON
THE SALARY COMPENSATION GUIDED PRODUCED BY THE MINNESOTA COUNCIL OF
NONPROFITS. THE LAST REVIEW WAS PERFORMED ON SEPTEMBER 1, 2010.

FORM 990, PART VI, SECTION C, LINE 19: MINNESOTA CAMP FIRE MINNESOTA

COUNCIL MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART VII

SCHEDULE R (Form 990)

# Related Organizations and Unrelated Partnerships

2010

entity

OMB No 1545-0047

Employer identification number 41-0706116Direct controlling 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.) End-of-year assets <u>e</u> Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. Total income ਭ িচুলুন িজ Identification of Disregarded Entitles (Complete If the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) FIRE USA MINNESOTA COUNCIL Primary activity Name, address, and EIN CAMP of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part

(g) Section 512(b)(13) controlled ž entity? Yes × Direct controlling entity Public charity status (if section 501(c)(3)) H LINE 11B, Exempt Code section 501(C)(3) Legal domicile (state or foreign country) MINNESOTA SUPPORTING ORGANIZATION Primary activity 41-1889037, 3100 WEST LAKE STREET, STE 100, THE MINNESOTA CAMP FIRE FOUNDATION Name, address, and EIN of related organization MINNEAPOLIS, MN 55416

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

032161 12-21-10 LHA

Schedule R (Form 990) 2010

41-0706116

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CAMP FIRE USA MINNESOTA COUNCIL

Schedule R (Form 990) 2010

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related in the importance or more related as a partnership during the tax year.)

Percentage ownership General or Percentage managing ownership Schedule R (Form 990) 2010 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)  $\widehat{\boldsymbol{\epsilon}}$ 3 Yes Share of end-of-year assets <u>6</u> Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)  $\equiv$ Share of total income te allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **© B** Direct controlling entity (f) Share of total income 3 Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) ত্ <u>e</u> Primary activity (d)
( Direct controlling entity (C)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 032162 12-21-10 Part IV

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	g
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?	s with one or more re	lated organizations listed i	n Parts II-IV?		]35B 2		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					<b>1</b> a	1	×
<b>b</b> Gift, grant, or capital contribution to other organization(s)				:	ð		×
c Gift, grant, or capital contribution from other organization(s)			•	:	10	X	
					19		×
					1e		×
					<b>新報報</b>	相關	Me '11'
f Sale of assets to other organization(s)					11	_	×
					19	Г	×
			:		ŧ		×
					=		×
בפמסס כן ומכווונסס, מקטוקונסיון, כן כניוכן מססכנט נס כניוכן כן פניוניים וכן			-			7	\$ 13.5°
Jease of facilities, equipment, or other assets from other organization(s)			•		7		×
<ul> <li>Performance of services or membership or fundraising solicitations for other organization(s)</li> </ul>	ization(s)				¥		×
	ization(s)		:		=		×
m Sharing of facilities, equipment, mailing lists, or other assets	:	•		-	£	X	
n Shanng of paid employees					1 L	×	
		:			इन्हें ज्यान होता	9.1	
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>					10		×
				:	4		×
							1.16
a Other transfer of cash or property to other organization(s)				•	Ē		×
					1.		×
ns for	vho must complete th	information on who must complete this line, including covered relationships and transaction thresholds.	relationships and transa	action thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	M	(d) Method of determining amount involved			
(1) THE MINNESOTA CAMP FIRE FOUNDATION	υ	135,000.					
6							
(3)							
(4)							ŀ
(5)							1
(9)							
032163 12-21-10	33	i i		Schedule R (Form 990) 2010	R (Form	(066	2010

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[Part Will Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(p)	(3)	(p)	(e)	<b>(</b>	(B)	(h)
INID poor sociation sensitive	vijatog vegang	مان سمار امتوا	Are all partners	Charle		191 1.V. abox	
of entity	רוווומוץ מכוועונץ	(state or foreign	section 501(c)(3) organizations?		tionate allocations?	amount in box 20	managing partner?
		country)	Yes No		1 1	(Form 1065)	
							· 
			-				
							_
						(1) (1 - 1 - 0	0,000

Schedule R (Form 990) 2010