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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation) ▶The organization may have to use a copy of this return to satisfy state reporting requirements Inspection

OMB No 1545-0047

Department of the Treasury

For the 2010 calendar year, or tax year beginning 4/1/2010 and ending 3/31/2011 C Name of organization Check if applicable Minnesota AFL-CIO D Employer identification number Doing Business As Address change 41-0785271 Number and street (or P O box if mail is not delivered to street address) Name change E Telephone number Initial return 175 Aurora Avenue 651-227-7647 Terminated City or town, state or country, and ZIP + 4 Amended return 55103 G Gross receipts \$ 3,093,301 Name and address of principal officer Application pending Yes X No H(a) Is this a group return for affiliates? Steve Hunter - same as above H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c) Tax-exempt status 5) ◀ (insert no) 4947(a)(1) or Website: ▶ H(c) Group exemption number ► 1338 K Form of organization X Corporation Trust Association Other > L Year of formation M State of legal domicile 1955 MN Summary Part I Briefly describe the organization's mission or most significant activities: To secure legislation which enhances the rights, security and welfare of workers and organized labor and to oppose legislation Activities & Governance inimical to these objectives. if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 4 67 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 15 Total number of volunteers (estimate if necessary) 6 50 Total unrelated business revenue from Part VIII, column (C), line 12. 7a 0 Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 8 Contributions and grants (Part VIII, line 1h). 678,968 325,950 Revenue 9 Program service revenue (Part VIII, line 2g). 2,619,518 2,695,448 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 13,214 10.806 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 46,656 61,097 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,358,356 3,093,301 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 14 0 Salaries, other compensation, employee benefits (Part X Collump (A) lines 5-10). 1.475.903 1,741,031 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 141241). 17 1,822,110 1,533,038 Total expenses. Add lines 13-17 (must equal-Part.IX, column (A), line 25) 18 3,298,013 3,274,069 19 Revenue less expenses. Subtract line 18 from (iii) (2) FN 60.343 -180.768End of Year **Beginning of Current Year** 2,123,463 20 Total assets (Part X, line 16) . . 1,886,127 21 Total liabilities (Part X, line 26) 1,162,873 1,106,305 22 Net assets or fund balances. Subtract line 21 from line 20 960,590 779,822 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Deglaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here Steve Hunter, Secretary/Treasurer Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check X Paid self-employed Gary W. Paulson Preparer's Firm's name ► Gary W. Paulson, CPA's Firm's EIN > 41-1643869 **Use Only** Firm's address ▶ 61 First Avenue NE, Little Falls, MN 56345 (320) 632-3656 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) . . .

Form 990 (2010

Form 9	990 (2010)	Minnesota AFL-CIO	41-0785271	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III		. 🖂
1	Briefly d	escribe the organization's mission:		
	-	a Parialation which appears the rights approximated walkers of walkers and	•••••	
		d labor and to oppose legislation inimical to these objectives.		
2	Did the	rganization undertake any significant program services during the year which were not listed on		
		Form 990 or 990-EZ?	Tyes	X No
		describe these new services on Schedule O.		
3		rganization cease conducting, or make significant changes in how it conducts, any program		
	services		· · TYes	X No
		describe these changes on Schedule O.	· · L les	✓ NO
4		the exempt purpose achievements for each of the organization's three largest program services	s by ovnonces	
7		501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am		.al
		ns to others, the total expenses, and revenue, if any, for each program service reported.	lount of grants an	IU
	anocatio	is to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenu		
4a	Commun		еъ	0.)
	rioduce	d weekly Labor Update for affiliates and members providing an update on issues and events of o	soucett to milou	
	member	s. Expanded our presence in social media through Facebook, Twitter, and a newly designed wet) page. Worked w	vith Area
	Labor Co	ouncils to expand our media presence state-wide through editorials, news events and press conf	erences.	
	Convent			
		d and hosted our biennial constitutional convention at which officers and board members were		onal
		ents adopted, resolutions were debated and acted upon, and candidates for political office recei	ved our official	
	endorse	nent.		
			<u> </u>	
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	e\$	0)
	Legislati			
		ed a members-only web page to coordinate lobbyists reports on various issues, hosted weekly i		or
		and assisted in coordinating their work. Hosted bi-monthly meetings with the leadership from the		
		and/or their staff. AFL-CIO staff testified at committee hearings, and lobbied legislattors. Organ) day at
		ol, rank and file turnout for key committee hearings and also worked with allies to organize a ma		
		ration under the "We Are One" banner. Helped the Area Labor Councils to organize town meeting	gs with legislator	s in their
		and coordinated media efforts among affiliates and Area Labor Councils on legislative issues.		
	Political:			
		with affiliates and Area Labor Councils on an intensive Labor 2010 political/electoral campaign, h		
		ton and reelect a number of our friends to the US Congress and the State legislature. Work incl		
		nent of candidates, independent expenditures for media and direct mail, volunteer member to m	ember doorknock	S
		e banks, and GOTV.	_	
4c	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	e\$	0.)
		vilion and State Fair:		
		d our daily programming through the run of the Minnesota State Fair through the use of union ac		
	"kids vot	e" project, and demonstrations from participating unions.		
				•••••••
		•••••••••••••••••••••••••••••••••••••••		

4d	Other pro	gram services. (Describe in Schedule O.)		
	(Expense	s \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total pro	gram service expenses ▶ 0		

Form 990 (2010) Minnesota AFL-CIO 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? (see instructions)	2	X	
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.	<u> </u>		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		×
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,"	ł		ļ
	complete Schedule D, Part I	6		×
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		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	Ť		 ``
	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	۰		 ^`
	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, VII, VII, IX, or X as applicable	3		
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		
ь	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		х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		X
	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			
4-	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	ا ۔ ا	╵╻┃	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a	-	
D	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b	l J	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	l	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 (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	
20-	If "Yes," complete Schedule G, Part III	19	}	X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note . Some	20a		<u>X</u>
ט	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).	20Ь	1	

Far	Checklist of Required Schedules (Continued)			
•	Did the second s		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	12:		-
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	<u> </u>
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			ĺ
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Ĥ
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		i	
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	disqualified 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,	20		 ^
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	,		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			۱.,
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20D		X
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		_ X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
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			
36	Part V, line 2			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
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	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	 		
JU	102 Note: All Form 990 filers are required to complete Schedule O	,,	V	

Minnesota AFL-CIO
Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
		(augusto)	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		2	
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 15			30
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	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	3Ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	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.	100		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
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 services provided to the payor?	7a		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	70	57.5	
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	-		-2-
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
c 4a	Enter the amount of reserves on hand	14a		Х
4a h		14a		<u> </u>

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.

1	
ı	Y

Sect	ion A. Governing Body and Management				
		. 1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 69	-		
b	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relati	1b 67	4		ĺ
2	any other officer, director, trustee, or key employee?	*			X
3	Did the organization delegate control over management duties customarily performed by or und		2	<u> </u>	
J	supervision of officers, directors or trustees, or key employees to a management company or of		١,		l v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w	<u>▼</u>	4	 	X
5	Did the organization become aware during the year of a significant diversion of the organization		5	\vdash	Î
6	Does the organization have members or stockholders?		6	Х	 ^-
7a	Does the organization have members, stockholders, or other persons who may elect one or mo		°	├^	
'a	of the governing body?		7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other		7b	_	\vdash
8	Did the organization contemporaneously document the meetings held or written actions underta		"		\vdash
Ü	the year by the following:	ixen during	1		
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	$\frac{\hat{x}}{x}$	\vdash
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be		- 05		
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		х
Sect	ion B. Policies (This Section B requests information about policies not required by the I				
	the interest of the interest o			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a	Х	
Ь	If "Yes," does the organization have written policies and procedures governing the activities of s				
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	•	10ь	х	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body bef		1		
	form?		11a		x
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		1		2 4 .
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that				
	rise to conflicts?		12b		Х
С	Does the organization regularly and consistently monitor and enforce compliance with the policy	r? If "Yes."			
	describe in Schedule O how this is done		12c		
13	Does the organization have a written whistleblower policy?		13		X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and approximate the process for th	proval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberati	on and decision?			
а	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	angement			(
	with a taxable entity during the year?		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to	evaluate			121
	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?	· <u>·</u> · · · · ·	16b		
Sect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (501(c)(3)s on	ly)		
	available for public inspection. Indicate how you make these available. Check all that apply.				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docume	nts, conflict of interes	it		
	policy, and financial statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the boo	ks and records of the	•		
	organization: Steve Hunter	054 007 764			
	175 Aurora Avenue, St. Paul, MN 55103				
				000	

Part VII Co

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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.
- 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.

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

Check this box if neither the organization nor all	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Posit	on (that ap	ply)	Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Sharyle Knutson										
President	40.	X	-	Х	\vdash		<u> </u>	118,048	0	20,855
(2) Steve Hunter Sec/Treas	40.	х		х				110,634	0	22,922
(3) Jim Brady LIUNA	1.	Х						О	0	0
(4) Bob Bratulich USW	1.	х						0	0	0
(5) Carl Crimmins UA	1.	х						0	0	0
(6) Tom Koehler IBEW	1.	X						0	0	
(7) Glen Johnson		X								0
IUOE (8) Marty Strub	1.				<u> </u>			0	0	
SMWIA (9) Tom Dooher	1.	X						0	0	0
Education MN	1.	X						0	0	0
(10) Eliot Seide AFSCME	1.	Х						0	0	0
(11) Peggy Whitney APWU	1.	Х						0	0	0
(12) Don Yetman	1.	Х						0	0	0
(13) Rob McKenzie UAW	1.	х						0	0	
(14) Wade Luneburg										0
UNITE HERE (15) Mary Broderick	1.	X	\dashv	\exists		\vdash	\dashv	0	0	0
Ed MN East Central	1.	Х						0	0	0
(16) Bill McCarthy UNITE HERE MN Metro	1.	X						0	0	0
								· 		Form 990 (2010)

Minnesota AFL-CIO

41-0785271

Part VII Sect	ion A. Omcers, Directors, I	usiees, key E	iibio	yee	S, a	ına	пign	est	Compensated	Employees	<u>s (co</u>	nunued	<u>" </u>	
Na	(A) ame and title	(B) Average	L .		chec		that ap		T Lebotranie	(E) Reportabl		Est	(F) mated	
· · ·		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensati from relate organizatio (W-2/1099-M	ed ns	composition from the composition of the composition	ount of other ensation im the nization related nization	on In
(17) Alan Netland AFSCME NE		1.	×						0		0		_	
(18) Bobby Kasper LIUNA St Paul Metro		1.	х						0		0			
(19) Laura Askelin AFSCME SE		1.	х						0		0			
(20) Mark Froemke BCTGM SE		1.	х						0		0			0
(21) Harry Melander UBC State Bldg Tr pre	98	1.	x						0		0			0
(22) Martha Johnson AFSCME State Ret Pr		1.	x						0		0			0
(23) Chas Martin-Apr AFSCME Const Group		1.	x						0		0			0
(24) Chris Erickson Educ MN East Central		1.	x						0		0			0
(25) Wayne Fleischh AFSCME East Centra		1.	x						0		0			0
(26) Debra Holder Ed MN 7250		1.	x						0		0			0
(27) Marybeth Juette	n	1.	x						0		0			0
(28) Steve Raatikka SMWIA		1.	х						0		0			_0
1b Sub-total c Total from cont	inuation sheets to Part VII, Section A . .		-	-			•	228,682 0		0 0		43,	777 0
d Total (add lines Total number of	individuals (including but not	imited to those						_d vier	228,682	100 000 in	0		43,	777
	ensation from the organization				2				———————			 		
	tion list any former officer, dir a 1a? <i>If "</i> Yes," complete Sche					/ee,		-	est compensated	i <i>.</i>		Y 3	es	No X
	al listed on line 1a, is the sum and related organizations gre											4		
5 Did any person l	isted on line 1a receive or acc													<u>^</u>
Section B. Independ	lered to the organization? If "\ lent Contractors	res, complete .	Scrie	uuie	JI	or s	ucn p	ers	<u>son</u>	<u></u>		5		<u> </u>
1 Complete this ta	ble for your five highest comp om the organization.	ensated indepe	nden	t co	ntra	acto	rs tha	t re	eceived more that	an \$100,000) of			
	(A) Name and business add	ress							(B) Description of sen	vices	С	(C) ompensa	ition	
None														0
														<u>0</u> 0
														_ <u>0</u>
O Total musels and	indopendent sector for f	udina h. 4 4 P	- :A	4- 41		. 12-				, 193	e mini	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e de la	0
	independent contractors (incli 000 in compensation from the	-	iited ►	io tr	1086	e IIS	tea a 1	DOV	re) wno received	, <u>a</u>				

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A	1) but are not requin	ed to complete col	umns (B), (C), and	(D).
	not include`amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				1.
	organizations in the U.S. See Part IV, line 21	0	 		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments,	1			
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0	 		
4	Benefits paid to or for members	0			.,
5	Compensation of current officers, directors,				
_	trustees, and key employees	226,734			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ا			
_	persons described in section 4958(c)(3)(B)	705.055			
7	Other salaries and wages	725,955			
8	Pension plan contributions (include section 401(k)	004.050			
^	and section 403(b) employer contributions)	284,250 420,493		 	<u> </u>
9 10	Other employee benefits	83,599			
10	Fees for services (non-employees):	03,399			
11	Management	اه			
a b	Legal	8,171			<u> </u>
C	Accounting	26,345			
ď	Lobbying	20,040			
e	Professional fundraising services. See Part IV, line 17		APPLICATION TO	是严禁解释的特别。	
f	Investment management fees	0			
g	Other	8,556			· · · · · · · · · · · · · · · · · · ·
12	Advertising and promotion	20,750	·····		
13	Office expenses	180,668			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	89,734			
17	Travel	48,222			
18	Payments of travel or entertainment expenses		-		
	for any federal, state, or local public officials	l ol		į	
19	Conferences, conventions, and meetings	90,051			
20	Interest	64,515			
21	Payments to affiliates	649,812			
22	Depreciation, depletion, and amortization	80,780	0	0	0
23	Insurance	33,023			
24	Other expenses. Itemize expenses not covered	地方指	11000000000000000000000000000000000000	"学"对理性 第一	THE REAL PROPERTY.
	above (List miscellaneous expenses in line 24f. If	北流			
	line 24f amount exceeds 10% of line 25, column			THE PROPERTY OF THE PARTY OF TH	THE PART OF
	(A) amount, list line 24f expenses on Schedule O.)		HALL	"点"。在2018年月期代	2015年1日本部計算程。
а	Scholarship awards	7,212			
b	Independent political expenses	107,940			
C	National AFL-CIO consultant	25,410			
d	Donations	16,045			
е	Register and vote expenses	54,032			
f		21,772			
25	Total functional expenses. Add lines 1 through 24f	3,274,069	0	0	0
26	Joint costs. Check here ▶ if following			!	
	SOP 98-2 (ASC 958-720). Complete this line				
	only if the organization reported in column	1			
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation	L		L	Form 990 (2010)

_P	art X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		97,497	1	166,690
	2	Savings and temporary cash investments		516,272	2	284,146
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Receivables from current and former officers,	directors, trustees, key			
		employees, and highest compensated employ Schedule L	-		5	
	6	Receivables from other disqualified persons (a	as defined under section		<u> </u>	<u> </u>
		4958(f)(1)), persons described in section 4958				
		employers and sponsoring organizations of se				
ξ	1	employees' beneficiary organizations (see inst			6	
Assets	7	Notes and loans receivable, net		0		0
ğ	8	Inventories for sale or use			8	<u> </u>
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or			,	
			10a 1,600,786	,		
	ь		10b 317,421		10c	1,283,365
	11	Investments—publicly traded securities		151,926		151,926
	12	Investments—other securities. See Part IV, lin		0	_	0
	13	Investments-program-related. See Part IV, lin		0		0
	14	Intangible assets		0	_	0
	15	Other assets. See Part IV, line 11		0		0
	16	Total assets. Add lines 1 through 15 (must ed		2,123,463	_	1,886,127
	17	Accounts payable and accrued expenses		5,782		3,599
	18	Grants payable		0,102	18	0,000
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ø	21	Escrow or custodial account liability. Complete			21	
Liabilities	22	Payables to current and former officers, direct		A CONTRACTOR		THE STATE OF THE S
ᅙ		employees, highest compensated employees,				
تّ	<u> </u>	persons. Complete Part II of Schedule L	•	37.4	22	
	23	Secured mortgages and notes payable to unre		1,157,091		1,102,706
	24	Unsecured notes and loans payable to unrelat	•	0	_	0
	25	Other liabilities. Complete Part X of Schedule		0	_	0
	26	Total liabilities. Add lines 17 through 25.		1,162,873		1,106,305
		Organizations that follow SFAS 117, check complete lines 27 through 29, and lines 33	here ►X and		的数 图	
2	27	Unrestricted net assets		960,590	27	770.000
<u>8</u>	28	Temporarily restricted net assets		900,090	28	779,822
	29	Permanently restricted net assets				
Š	29	•		De a b di tod	29	2017 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, and complete lines 30 through 34.	check here ▶			
ğ	30	Capital stock or trust principal, or current funds	s		30	
\89	31	Paid-in or capital surplus, or land, building, or	equipment fund		31	
3t /	32	Retained earnings, endowment, accumulated in	income, or other funds		32	
ž	33			960,590	33	779,822
	34	Total liabilities and net assets/fund balances .	<u> </u>	2,123,463	34	1,886,127

Form 9	990 (2010) Minnesota AFL-CIO 41-07	85271	Pa	ge 12
Par				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	_		1,616
2	Total expenses (must equal Part IX, column (A), line 25)		3,27	4,0 <u>69</u>
3	Revenue less expenses. Subtract line 2 from line 1		<u>-11:</u>	<u>2,453</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		96	0 <u>,590</u>
5	Other changes in net assets or fund balances (explain in Schedule O)			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		84	3 <u>,137</u>
<u>Part</u>				_
	Check if Schedule O contains a response to any question in this Part XII			X
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	<u>L_</u>	X
b	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>	<u> </u>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	-	l	ĺ
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			']
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		;];÷;
	issued on a separate basis, consolidated basis, or both:		/s :	,,,
	X Separate basis		46.	2.41
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	l	х
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3Ь		
		Form	990	(2010)

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	Cash	Noncash
1 Federated Campaigns		
2 Membership dues		
3 Fundraising events		
4 Related organizations	100,410	
5 Government grants (contributions)	100,833	
6 All other contributions, gifts, grants, and similar amounts not included above:	11,000	
	14.750	
	30,642	
Other contributions total	30,642	

SCHEDULE D (Form 990)

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.

OMB No 1545-0047

Inspection Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ See separate instructions.

Minnesota AFL-CIO 41-0785271 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . 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 Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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 Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a ь Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a d 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and 9 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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. 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: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

_				
P	'n	n	e	

		4							1 age 2
Par								ued)	
3	Using the organization's acquisition, access		s, check ar	ny of the foll	owing that	are a signific	ænt		
_	use of its collection items (check all that ap Public exhibition	ply):	Loone	or exchange					
а	= '	_ -	,	n exchange	programs				
Ь	Scholarly research	е	Other						
C	Preservation for future generations								
4	Provide a description of the organization's of Part XIV.	collections and explain	how they	further the c	organizatio	n's exempt p	urpose i	n	
5	During the year, did the organization solicit assets to be sold to raise funds rather than						Y	es 🗀	No
Par	IV Escrow and Custodial Arrangel IV, line 9, or reported an amount	•	_	zation ansv	wered "Ye	es" to Form	990, Pa	rt	
1a	Is the organization an agent, trustee, custo	dian or other intermedi	ary for cor	ntributions o	r other ass	sets not		-	
	included on Form 990, Part X?						Y	es 🗌	No
b	If "Yes," explain the arrangement in Part XI	V and complete the fol	lowing tab	le:					
					ļ		Amount		
C	Beginning balance				1c				0
d	Additions during the year				1d				
e	Distributions during the year				1e				
f	_						<u></u>		
2a	Did the organization include an amount on If "Yes," explain the arrangement in Part XI		21?				Y	es X	No
Part			wered "V	es" to Form	n 000 Pa	rt IV line 10			
rait			or year	(c) Two years		Three years bac		our years	s back
1a	Beginning of year balance	0	0	(b) The your		Mark William			
b	Contributions								
c	Net investment earnings, gains,				12	TRANS		SILVE	
_	and losses		l		100	74.00			经 基本
d	Grants or scholarships				1	- Marie	T STATE	HE IN	
е	Other expenditures for facilities								
	and programs				1		製造家		
f	Administrative expenses					科學教育	Y SIER	Car.	被车
g	End of year balance	0	0		0 📆	沙里市沙 沙沙	经		CAR
2	Provide the estimated percentage of the ye								
а	Board designated or quasi-endowment	<u>%</u>							
b	Permanent endowment	%							
C	Term endowment	ession of the organiza	tion that a	ro hold and	administa	ad for the			
3a	organization by:	ession of the organiza	lion that a	ie lielu aliu i	aummstei	eu ioi lile		Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
ь	If "Yes" to 3a(ii), are the related organization						3b		
4	Describe in Part XIV the intended uses of the	•							
Part	VI Land, Buildings, and Equipmen	it. See Form 990, Pa	rt X, line	10.			-		
	Description of investment	(a) Cost or other basis (investment)		st or other (other)		umulated eciation	(d) B	ook valu	ie
1a	Land	0		0	A PRINCE	AND PARTY.			0
b	Buildings	0		1,394,431		148,295		1,24	16,136
C	Leasehold improvements	0		0		0			0
d	Equipment			154,021		142,960		1	11,061
e	Other			52,334		26,166		2	26,168
Tota	l. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, column	(B), line 10	(c).)			1,28	33,365
						Scl	nedule D (i	Form 99	30) 2010

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

Part VII

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other	0		
(A)	0		
(B)	0		
(C)	0		
(D)	0		
(E)	0		
(F)	0		-
(G)	0		
(H)	0		
<u>(I)</u>	0		A SHEET WATER STORY
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			STATE OF STA
Part VIII Investments—Program Relat	ed. See Form 990, Part X		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)	0		
(2)	0		
(3)	0		
(4)	0		
(5)	0		
	0		
	0		
(8)	0		
(9)	0		
(10) Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0		
Part IX Other Assets. See Form 990,			
	a) Description	(b) Book v	mluo
	a) Description	(b) Book V	0
			0
(3)			
(4)			0
(5)			
(6)			0
(7)			0
(8)			
(9)			0
(10)			0
Total. (Column (b) must equal Form 990, Part X, o	col. (B) line 15.)		0
Part X Other Liabilities. See Form 99	0, Part X, line 25.		
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes	0	ere e la ci re file de la circa del circa del circa de la circa d	. 2
(2)	0		
(3)	0		, se
(4)	0	La Carrier of the state of the	
(5)	0		
(6)	0	Market Services	
	0		
(8)	0		
(9)	0		
(10)	0		
(11)	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	0		

Schedule D (Form 990) 2010 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI 3,093,301 2 2 3,274,069 3 3 -180,768 4 4 5 Donated services and use of facilities 5 6 6 7 8 8 9 9 0 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 -180,768 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 3.381.411 2 Amounts included on line 1 but not on Form 990. Part VIII, line 12: b 2b 2c C d 20 288,110 3 3 3.093,301 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . 4b h Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 3.093.301 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 3,562,179 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a b 2b 2c C d 2e 288,110 3 3 3,274,069 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. . . . 4a b 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 3,274,069 **Supplemental Information** Part XIV Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. XII - 2d and XIII -2d - Politicial expenses reported on a separate 990 (91-2101127).

SCHEDULE O (Form 990 or 990-EZ)

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.

2010
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Minnesota AFL-CIO

Employer identification number

41-0785271

Part IV - 3 - Political activity is maintained in a seperate fund for which a separate 990 return is filed (91-2101127).
Part VI - Sec A - 6&7 a - Affiliated organizations send member delegates to the Bi-annual convention based on per capita
payments made. Delegates vote on constitutional items and elect a President and Secretary/Treasurer to administer ongoing
operations. A General Board made up of representatives of the affiliated organizations acts as the oversight body between
conventions
Part VI - Sec B - 11A - The 990 is reviewed by the elected Secretary/Treasurer prior to submission to the IRS.
Part VI - Sec B - 15a - Salaries of the President and Secretary/Treasurer are determined at the convention Bi-annually.
Part VI - Sec B - 19 - Governing documents, policies and financial statements would be made available upon authorized
formal request.
Part XII - 2C - As in the past, the financial statements are presented to the "Audit and Credentials" committee by the independent
CPA auditor.
••••••
······································

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Minnesota AFL-CIO

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions. ► Attach to Form 990.

OMB No 1545-0047 2010 Open to Public	20000
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Employer identifiçation number

41-0785271

Part I Identification of Disregarded Entities (Complete	if the organization answered "Yes" to Form 990, Part IV, line 33.)	nswered "Yes" to	Form 990, Part I	V, line 33.)			
(a) Name, address, and EiN of disregarded entity	(b) Primary activity		(c) Legal domicile (state To or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	ling
(1)				0	0		
(2)			-	0	0		
(3)				0	0		
(4)				0	0		
(5)				0	0	:	
(9)				c	C		
Part II Identification of Related Tax-Exempt Organization one or more related tax-exempt organizations during	lons (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had ng the tax year.)	e organization an	swered "Yes" to	Form 990, Pa	art IV, line 34 be	cause it had	_
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	atus Direct controlling entity	00	1) 12(b)(13) oiled iy?
						Yes	<u>و</u>
(1) MN AFL-CIO Political Fund 91-2101127 175 Aurora Avenue, St Paul, MN 55103	Political fund	MN	527				×
(2) MN AFL-CIO Building Corporation 41-1818507	Title Holding Company MN	Z	501(c)(2)				×
[4]							
(5)							
(9)							

Schedule R (Form 990) 2010

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

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Minnesota AFL-CIO

Schedule R (Form 990) 2010

Page 2 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 organizations treated as a partnership during the tax year.) Part III

(k) Percentage ownership		%	%	%	 %	%	%	*		(h) Percentage ownership	%	%	%	%	%	%	%	190) 2010
. (l) General or f managing partner?	Yes No								to Form 990, Part	(g) Share of end-of-year assets	0	0	0	0	0	0	0	Schedule R (Form 990) 2010
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		0	0	0	0	0	0	Ö	d "Yes" to Forn		0	0	0	0	0	0	0	
(h) Disproportionate allocations?	Yes No								on answere (year.)	(f) Share of total income						:		
g) snd-of-year sets	Y	0	0	0	0	0	0	C	as a Corporation or Trust (Complete if the organization answered "Yes" nizations treated as a corporation or trust during the tax year.)	(e) Type of entity (C corp. S corp. or trust)								
Share of total income S		0	0	0	0	0	0	C	rust (Completer	(d) Direct controlling entity								
Share			i						ration or T	(c) Legal domicile (state or foreign country)								
(e) Predominant income (related, unrelated, excluded from	sections 512-514)		:							(b) Primary activity								
(d) Direct controlling entity									zations Taxak nore related or									
(c) Legal domicile (state or foreign									d Organi	organization				1 0 1 3 0 1				
(f) (d) (e) (f) (f) (f) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g									Identification of Related Organizations Taxable IV, line 34 because it had one or more related organ	(a) Name, address, and EIN of related organization					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(a) Name, address, and EIN of related organization	;	(1)	(2)	(6)	(4)	(5)	(9)	(7)	Part IV Identific	Name, addre	(1)	(2)	(3)	[4]	(5)	(9)	(7)	

Page 3.

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

Note	Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.		. Yes	S S
-	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?	isted in Parts II-IV?	40	経済
æ	Receipt of (I) interest (II) annuities (III) royalties or (Iv) rent from a controlled entity.		1a,	×
Ω	Gift, grant, or capital contribution to other organization(s)		1b	×
O	. Gift, grant, or capital contribution from other organization(s)		10	×
ס			10	×
ø			1e	×
•	(a) matter in a color of the co		1	** *
- 0			10	×
) E			÷	×
-	Lease of facilities, equipment, or other assets to other organization(s)		7	×
,				
_	Lease of facilities, equipment, or other assets from other organization(s)		×	1
¥ -	Performance of services or membership or fundraising solicitations for other organization(s).		* =	× >
. E			± ×	╁
_			1n ×	
			; ;	
0 1			9 ;	×ļ,
<u>α</u>	 Keimbursement paid by other organization for expenses. 		d T	< -
5	Other transfer of cash or property to other organization(s)		101	×
r L			-	×
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ered relationships and trans	saction thres	sholds.
	(a) (b)	(0)	9	
	Name of other organization Transaction type (a–t)	Amount involved	Method of determining amount involved	ermining
1				
		5		
(2)		0		
ල		0		
5		C		
		5		
(2)		0		
(9)		0		
		Schedu	Schedule R (Form 990) 2010	990) 2010

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

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) (b) (c) (c) (d) (d) (d) (e)	(a)	(0)	(p)		(6)		€	(6)		E
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	rtners In (3) Jons?	Share of end-of-year assets	Disproportion alloca	Disproportionate allocations?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	General or managing partner?
			Yes	ę		Yes	å		Yes	2
(1)					0			0		└
(2)					0			0		
(3)					0					
(4)					0			0		
(5)					0			0		
(9)					0			0		
(7)					0			0		
(8)					0			0		
(6)					0			0		
(10)					0			0		
(11)					0			0		
(12)					0			O		
(13)					0			0		
(14)					0			0		
(15)					0					
(16)					0			0		
								Schedule R (Form 990) 2010	лт 990) 2010

Part IX. Line 22 (990) - Depreciation, Depletion, and Amortization

Part IX, Line 22 (990) - Depreciación, L	repieuon, and	Amoruzauon		
	(A)	(B)	(C)	(D)
	Total	Program	Management	Fundraising
		services	and general	· ·
1 Depreciation. ,	80,780		· ·	
2 Depletion	0			
3 Amortization	0			
4 Total	80,780	0	0	

Continuation Sheet for Form 990

Page 1 of 2

Name of the Organization

Employer identification number

41-0785271

Minnesota AFL-CIO Continuation of Officers, Directors, Trustees, Key Employees, and Highest Part VII Section A Compensated Employees

Compensated Emp	oyees							·		
(A) Name and title	(B) Average					that ap		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(29) Julie Blaha Ed MN Minn Metro	1.	х						0	0	0
(30) Pam Donato NALC	1.	х						0	0	0
(31) Tim Donovan CWA	1.	х						0	0	0
(32) Mary Falk AFSCME	1.	х						0	0	0
(33) Teferi Fufa Education MN	1.	х						0	0	0
(34) Linda Hamilton MNA	1.	x						0	0	0
(35) Bob Hansen UA	1.	х						0	0	0
(36) Pam Mueller Education MN	1.	х						0	0	0
(37) Terry Nelson IUPAT	1.	х						0	0	0
(38) Tom Olson IBEW	1.	х						0	0	0
(39) Cliff Poehler AFSCME	1.	Х						0	0	0
(40) Michelle Sommers ATU	1.	х						0	0	0
(41) Lisa Stager IAMAW	1.	х						0	o	0
(42) Jim Kottke USW	1.	х						0	0	0
(43) Craig Olson IUPAT	1.	х						. 0	0	0
(44) John Rebrovich USW	1.	x						0	0	0
(45) Ida Rukavina AFSCME	1.	Х	_					0	0	0
(46) Jennifer Schultz Ed MN	1.	х						0	0	0
(47) Judy Wahlberg AFSCME	1.	х						0	0	0
(48) Joe Cerar Education MN	1.	х		_				0	0	0
(49) Russell Hess LIUNA	1.	x						0	0	0

Continuation Sheet for Form 990

Page 2 of 2

Name of the Organization

Employer Identification number

Minnesota AFL-CIO

41-0785271

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Empl	oyees									
(A)	(B)	D			C)	45-4		(D)	(E)	(F)
Name and title	Average hours per week (describe hours for	Individual trustee or director	T	Officer	т —	Highest co	<u> </u>	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	related organizations in Schedule O)	trustee	al trustee		уее	Highest compensated employee		(W-2/1099-MISC)	,	organization and related organizations
(50) Lee Hiller IUOE	1.	х						0	0	0
(51) Paul Marquardt UA	1 <u>.</u>	х						0	0	0
(52) Michael Murphy IBEW	1.	х						0	0	0
(53) Jeff Birttnen AFSCME	1.	х						0	0	0
(54) Mike Buesing AFSCME		х						0	0	0
(55) John Ewaldt AFSCME	1.	х						0	0	0
(56) Brianna Halverson IAMAW	1.	х			_			0	0	0
(57) Warren Harder <u>IUPAT</u>	1.	x						0	0	0
(58) Richard Magler Jr Education MN	1.	х						0	0	0
(59) Roy Magnuson Education MN	1.	x						0	0	0
(60) Jamie Mcnamara IBEW	1.	x						0	0	0
(61) Mark Steffer Ed MN 2009	1.	х						0	. 0	0
(62) Stan Theis UA 34	1.	х						0	0	0
(63) Charles Witt Ironworkers	1.	х		:				0	0	0
(64) Kent Courrier IUOE 49	1.	х						0	0	0
(65) Dale Moerke UFCW	1.	Х						0	0	0
(66) Jeff Offutt Education MN	1.	х						0	0	0
(67) Kevin Olson AFSCME 701	1.	X						0	0	0
(68) Tony St Michel BCTGM	1.	Х						0	0	0
(69) Francisco Altamirano LCLAA/IUPAT	1.	Х						0	0	0
(70)										

Minnesota AFL-CIO

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

									1,600,786	285 594	317 421	c	1 357 768	1 283 365
				Leasehold			Check If	Check If		Beginning	Endino		20.1.1001.	1,500,000
				Improve-	_			Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Endino
	Category or Item	Land	Buildings	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Balance	Bafance
- 1	State fair pavillon		×						1,394,431	92,486	148,295		1,301,945	1.246.136
- 1	State fair sign				×				994	99	994		0	0
	Office furniture				×				74,661	81,011	74,661		0	0
	Office equipment				×				78,366	102,381	67,305		12.211	11.061
П	Vehicles					×			52,334	8,722	26,166		43,612	26.168
ام									0				0	0
_									0	0			o	0
80									0	0			C	
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2									0	0			0	0
= ;									0	0			0	0
12									0	0			0	0
13									0	0			0	0
2									0	0			0	0
2									0	0			0	0
2									0	0			0	0
									0	0			0	0
٥									0	0			0	0
2 6									0	0			0	0
20									0	0			c	