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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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Servi For the 2012 calendar year, or tax year beginning 4/1/2012 and ending 3/31/2013 C Name of organization Check if applicable Minnesota AFL-CIO Employer identification number Doing Business As Address change 41-0785271 Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number Initial return 175 Aurora Avenue 651-227-7647 City, town or post office, state, and ZIP code Terminated St Paul Amended return MN 55103 G Gross receipts \$ 3.571.554 F Name and address of principal officer Application pending H(a) is this a group return for affiliates? H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c) 4947(a)(1) or 527 Tax-exempt status (insert no.) Website: ▶ H(c) Group exemption number ► 1338 Trust X K Form of organization Corporation Association Other > L Year of formation M State of legal domicile 1955 MN Summary 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 3 Number of voting members of the governing body (Part VI, line 1a) 3 74 Number of independent voting members of the governing body (Part VI, line 1b) 4 72 4 5 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 16 6 Total number of volunteers (estimate if necessary) 6 500 Total unrelated business revenue from Part VIII, column (C), https://di 7a 7a 0 Net unrelated business taxable income from Form 990-17, line 34 7b 0 Prior Year Current Year Contributions and grants (Part VIII, line 1h) 1,261,391 596,469 Revenue Program service revenue (Part VIII, line 2g) 2.888.465 2.641.588 Investment income (Part VIII, column (A), lines 3: 4. and 7d) 10 4,206 4,482 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 368.077 329.015 11 Total revenue—add lines 8 through 11 (must equal Part VIII column: (A), line 12) 4,522,139 3,571,554 12 Grants and similar amounts paid (Part IX, column=(A), lines 1-3) 13 O 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,914,120 1.782.661 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ **"我们的",这个人就** b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,366,828 1,974,550 3,757,211 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,280,948 19 Revenue less expenses Subtract line 18 from line 12 241,191 -185,657 End of Year **Beginning of Current Year** Total assets (Part X, line 16) 1,738,191 20 2,029,427 Total liabilities (Part X, line 26) 902,835 21 933,414 Net assets or fund balances Subtract line 21 from line 20 1,096,013 835,356 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Qeclaration of preparer (other than officer) is based on all information of which preparer has any knowledge CANNE 110613 Sign Signature of officer Here Steve Hunter, Secretary/Treasurer Type or print name and title PTIN Print/Type preparer's name Check X if ⊊Paid 10/31/2013 self-employed P00484716 Gary W Paulson .Preparer Firm's EIN > 41-1643869 Firm's name ► Gary W Paulson, CPA Use Only 320-630-9166 Firm's address ▶ 4962 Black Spruce Trail NW, Hackensack, MN 56452

For Paperwork Reduction Act Notice, see the separate instructions.

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

X Yes

Form **990** (2012)

No

	90 (2012)	Minnesota AFL-CIO	41-0785271	Page 2
Pa	rt III	Statement of Program Service Accomplishments		rage 2
		Check if Schedule O contains a response to any question in this Part III	•	\cap
1		escribe the organization's mission		
	To secu	re legislation which enhances the rights, security and welfare of workers and		
	organiz	ed labor and to oppose legislation inimical to these objectives		
				
2	Did the	organization undertake any significant program services during the year which were not listed on		
	•	Form 990 or 990-EZ?	Yes	X No
•		describe these new services on Schedule O		
3	bid the	organization cease conducting, or make significant changes in how it conducts, any program		
		describe these changes on Schedule O	Yes	X No
4		e the organization's program service accomplishments for each of its three largest program service:		
•	expens	es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and al	s, as measured by	
		expenses, and revenue, if any, for each program service reported	ocations to others,	
		expenses, and revenue, a dry, for each program service reported		
4a	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	<u> </u>
	•	QT TO AFEILIATES. Significant recourses were raised and expended to support members of the		/
		who had been locked out by their employer - American Crystal Sugar Support included direct		
	relief ai	dita dan mendengan mendengan pengangan pengah padah pengangan pengangan pengangan pengangan pengangan penganga		
		s and picketing We also worked to support the musicians of the St Paul		
	Chamb	er Orchestra and the Minnesota Symphony Orchestra who had been locked out by the governing		
	boards	of those Organizations		
	(Code) (Expenses \$ including grants of \$) (Reven	ue \$	
4b	LEGISLA	TIVE In the first few months of the fiscal year we continued to organize and coordinate a comprehens	ive lobbying effort	among our
		s to ward off a "Right to Work" constitutional amendment and other attacks on organized labor including		
		ng wage law, to dismantle the Public Employee Labor Relations Act, and to eliminate seniority rights $$ V		
	efforts	n support of a Capitol Bonding Bill and a proposal to build a new stadium for the Mn Vikings Efforts in	cluded recruiting vo	olunteers
		e various unions to attend legislative hearings and demonstrations outside of the House and Senate Ch		ne last few
	months	of the fiscal year, working with new majorities in the State House and State Senate we initiated legisla	tion to raise the mil	าเทบท
	wage a	d to reform worker's compensation. We worked to include language in the legislation creating the Mi	n Health Care Excha	nge that
	-	ed the concerns of a number of our affiliates. We supported legislation to increase funding for nursing		
		sation, P-12 Education, Higher Education, Local Government Aid and state services We advocated for		pay for
		inding increases We also supported a bonding bill to rehabilitate the State Capitol	Working with AFSC	
		worked to pass legislation allowing child care workers and home health care aids to organize into a ur	non	
-4c	(Code) (Expenses \$ including grants of \$) (Reven		
40	•			
		AL Labor 2012 was the largest political effort yet undertaken by the Minnesota AFL-CIO Working with		
		ate union members across the state on electoral issues and candidates. Our efforts helped to defeat tw		
		nents, change the balance of power in both the State House and State Senate, and defeat a sitting cong	gressman with a lab	or friendly
	candida	ee		
	The offi	discoulded outcomes up of targeted mail, door to door once and the upon finding banks and supplied	Jaco Joaflotina	
	The effo	rt included extensive use of targeted mail, door to door canvassing, the use of phone banks and workp	nace leatieting	
	At the e	nd of the campaign, extensive work was done to ensure that union members actually voted in the elec	tion	
	AL DIE E	as of the compositing extensive work was done to ensure that union members actually voted in the elec		
	Thousar	ds of volunteer hours went into this effort		
	Othor	rogram services (Describe in Schedule O)	····	
4d	(Expen	and the second s	0)	
4e		rogram service expenses 0		

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			
4	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,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		l l	
	Part III	5	_ <u>x</u>]	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	ļ	ļ	ı
	"Yes," complete Schedule D, Part I	6		Х
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	}	Х
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, for escrow or custodial account liability, serve as a			_
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt		- 1	
	negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	***		
	VII, VIII, IX, or X 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	
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		Х
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 16? 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		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			
	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	4.0	\ ,	
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	106		
40	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\frac{\hat{x}}{x}$
	Did the organization maintain an office, employees, or agents outside of the office states? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1-761		 ^
J	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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		х
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		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		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		<u> </u>
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	ļ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L

Form.990 (2012) Minnesota AFL-CIO 41-0785271 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х 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 Schedule K. If "No," go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Х 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b 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) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28¢ Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 Х 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 Χ 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 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled Х entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

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

38

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

37

Х

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable. 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . За Х 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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 If "Yes," enter the name of the foreign country b See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was C required to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year ď Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 Did the organization make any taxable distributions under section 4966? 9a а 9b Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter 10 10a Initiation fees and capital contributions included on Part VIII, line 12 а 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter 11 731, Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources b 11b against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year b ā.: Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c Enter the amount of reserves on hand C 14a Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

Sect	ion A. Governing Body and Management	• •	-	<u> </u>
	on the dotterning body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 74	1000	162	140
	If there are material differences in voting rights among members of the governing body, or	1.5	**	
	if the governing body delegated broad authority to an executive committee or similar	7 4	,	
	committee, explain in Schedule O		hi Mir	•
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 72	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	*		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct]		ŀ
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
.5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?.	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	1		ļ
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,]	!) ,
8	stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		X
0	the year by the following:	및 4Pg	id Las	\$\frac{1}{2}
а	The governing body?	8a	X	لك
b	Each committee with authority to act on behalf of the governing body?	8b	X	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	-		_
_	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	ì	1	1
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	L
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		قت.	Sir!
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	ļ	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	122)	
40	describe in Schedule O how this was done Did the organization have a written whistleblower policy? .	12c		X
13 14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by	P 5/1880	eihliatzar.	織
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	9	(3.031 ¹ 4.198)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
а	The organization's CEO, Executive Director, or top management official	15a	X	
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 arrangement		ŧ	<u> </u>
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1 44	į1 -	7.
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	<u></u>		لتا
	the organization's exempt status with respect to such arrangements?	16b	L	L
	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 (Section 501(c)(3	is oni	y)	
	available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. X Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest			
13	policy, and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► Steve Hunter 651-227-76	47		
	175 Aurora Avenue, St. Paul, MN 55103			-

, ,	45, 919										
Part VII	Minnesota AFL-CIO	-4 +4			_	<u> </u>				41-07852	71 Page 7
Part VII	Compensation of Officers, Dire	ctors, Truste	es, K	ley	Em	pic	oyee	s, F	lighest Comp	ensated	
	Employees, and Independent C Check if Schedule O contains a re	ontractors		o e tu	on i	n ++	D	~ · · ·	.711		<u>г</u>
Section A.										<u> </u>	
	Officers, Directors, Trustees, Key E										
organization's	his table for all persons required to be I tax year	изтеа нероп со	mpen	ısatı	on f	or t	he ca	lend	lar year ending v	vith or within the	
List all of compensations	of the organization's current officers, di ion Enter -0- in columns (D), (E), and (I	rectors, trustees	(whe	ethe	r inc	divid	luals	or o	rganizations), re	gardless of amou	unt
	of the organization's current key emplo						٠. ـ د . ـ		- (11)		
List the	organization's five current highest con	nyees, ii ariy set anensated emplo)	ructi : (at!	ons ber	thar	aeiin	HION	or "key employe	96 " 00. or kou omalo	,,,,,,\
who received	reportable compensation (Box 5 of Forum any related organizations	m W-2 and/or Bo	ox 7 o	of Fo	orm	109	9-MI	SC)	of more than \$1	00,000 from the	yee,
• List all	of the organization's former officers, ke	y employees, ar	nd hig	hes	t co	mpe	ensat	ed e	mployees who r	eceived more tha	an
	eportable compensation from the organ										
 List all organization, 	of the organization's former directors (more than \$10,000 of reportable compe	or trustees that ensation from the	recen	ved, anıza	, in t atioi	he d n an	capad id ani	ity a	as a former direc ated organizatio	tor or trustee of t	he
List persons in	n the following order individual trustees employees, and former such persons										
Check the	s box if neither the organization nor any	y related organiz	ation	con	npe	nsa	ted a	ny c	urrent officer, dir	ector, or trustee	
			T			C)					
			Position								
	(A) Name and Title	(B) (do not check more than one (D) Average box, unless person is both an Reportable						(D) Reportable	(E) Reportable	(F) Estimated	
		hours per	office	er an	d a d	irect	or/trust	ee)	compensation	compensation	amount of
		week (list any hours for	Individual I	Inst	Officer	Fey	를 하	Former	from the	from related organizations	other compensation
		related organizations	reci	E S	ğ	<u> </u>	lest	뤝	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
		below dotted	학	ňal		employee	le co		(00-2/1099-0013C)		organization and related
		line)	Individual trustee or director	Institutional trustee		8	Pen	1			organizations
		1	"	e e	ł	{	Highest compensated employee	1		,	
(1) Sharyle	Knuteon	40 00	 	 	├─	├	<u>├</u> -	-			
President	: Midison	40.00	х		x		ĺ	ĺ	122,595	اه	13,906
(2) Steve	funter	40 00	 ^-	\vdash	⇈	╁	\vdash	╁─╴	122,595	<u> </u>	13,300
Secretary / Tr			X	1	x	}	1		111,676	o	23,060
(3) Jim Bra		1 00				\vdash	\vdash	T	, , , , , , , ,	<u>-</u>	
LIUNA			x			ł]		ĺo	o	0
(4) Bob Br	atulich	1 00	1	T	\vdash						
USW			X	1	}	ľ	ł	}	}		
(5) Dave Y	barra	1 00									
UA			X		<u> </u>		<u> </u>	<u> </u>			
(6) Tom Ko	pehler	1 00			_						
IBEW			X	L	<u> </u>	<u> </u>	<u> </u>	<u> </u>			
(7) Glen Jo	phnson	1 00]				
IUOE]] X	1	1]	1]	Ì	Ì	

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(8) Jim Bowman

(9) Tom Dooher

(11) Peggy Whitney

(12) Don Yetman

(13) Rob McKenzie

(14) Wade Luneburg

(10) Eliot Seide

SMWIA

Education MN

AFSCME

<u>APWU</u>

IAMAW

UAW

UNITE HERE

Part	VI Section A. Officers, Directors, Tru	stees, Key Em	ploye	es,	and	ı Hi	ghes	t Co	ompensated Em	plovees (cont	nued)	Pa	ige 8
	(A)	(B)	(C) Position (do not check more than or						(D)	(E)	T T	(F)	
	Name and title	Average hours per week (list any hours for related organizations below dotted line)		er an		rect	Highest compensated		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con f org	stimated mount of other ipensation the anization d related anization	of son on ed
	lary Broderick	1 00	1								 		
	nt'l ALC - Ed MN	1.00	X	 	ļ	ļ	<u> </u>	<u> </u>	<u> </u>		<u> </u>		
	ıll McCarthy LC - Unite HERE	1 00	x						}				
	lan Notland	1 00		-	-	-		├	<u> </u>		+		
	ast ALC - AFSCME		x	l			Į		ļ				
	obby Kasper	1 00	Ť	1		-		1			+		
	ALC - LIUNA		X	l	}	1					1		
(19) L	aura Askelin	1 00						П					
	ast ALC - AFSCME		X	igspace	<u> </u>	_	.	_		<u> </u>	<u> </u>		
	Mark Froemke	1 00	1		ļ	ļ			ļ	ļ			
	LC - BCTMG	1.00	X	╁	├-	├	 -	⊢			┼—		
	larry Melander Idg Tr Pres - UBC	1 00	×	1	}	}	1	1			Ì		
	II Maana	1 00		\vdash	1-	├	├~	┢	 				
	tet Pres - AFSCME		x				ł			l	İ		
	has Martin-Apri	1 00		1	T		t				\top		
	Grp Rep - AFSCME		X		<u> </u>			L					
	hris Erickson	1 00				•							
	IN - East Central		X.		<u> </u>	L	<u> </u>	L			 		
	Vayne Fleischhacker	1 00	1	1			1						
	1E - East Central	<u> </u>	<u> </u>	<u> </u>	L	L	<u>. </u>	Ļ	201.071				
	ub-total otal from continuation sheets to Part VII, S	ootion A						>	234,271))	36	966 <u>5,</u> 966
	otal (add lines 1b and 1c)	ection A						•	234,271			36	,966
	otal number of individuals (including but not lii	mited to those his	sted a	abov	/e) \	who	rece				<u>-1</u>		,000
	eportable compensation from the organization				2					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	· · · · · · · · · · · · · · · · · · ·											Yes	No
3 D	lid the organization list any former officer, dire	ector, or trustee,	key e	emp	loye	e, c	or hig	hes	t compensated				
е	mployee on line 1a? If "Yes," complete Sched	lule J for such ın	divid	ual							3	MTS-COMM	X
	or any individual listed on line 1a, is the sum o								•				
	ne organization and related organizations grea	iter than \$150,00	00? <i>I</i> .	f "Y	9S, "	con	nplete	e Sa	chedule J for suc	h		95°	
ır	ndıvıdual										4 860/8548	MORPH CON	X Batter.
	hid any person listed on line 1a receive or accr									vidual			
	or services rendered to the organization? If "Y	es," complete So	chedi	ule .	l for	suc	ch pe	rsoi	<u> </u>		5		<u> </u>
1 0	n B. Independent Contractors Complete this table for your five highest compeonmensation from the organization Report co	•									s tax		
y	ear							γ					
	(A) Name and business add	reec						1	(B) Description of ser	vices	(Compe		
	Name and pushess aud	.003						\vdash	Description of set		Jonipe	.54.1011	0
	NONE							\vdash					0
	NONE							T					0
						_		Γ					0
													0
	otal number of independent contractors (inclu	-	ted to	the	se	liste	d abo	ove)	who received	retair in			

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . (A) (B) (C) (D) Total revenue Related or Unrelated Revenue exempt business excluded from function revenue tax under sections revenue 512, 513, or 514 Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts Membership dues 1b 0 Fundraising events 1c Related organizations 1d 176,460 Government grants (contributions) 110,000 1e All other contributions, gifts, grants, and similar amounts not included above 1f 310,009 Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f 596,469 **Business Code** Revenue 900099 Political fund activity-net(separate 990 filed) 2a -18,750 ь Per capita taxes 900099 2,658,588 Program Service Affiliation fees 900099 1,750 d 0 All other program service revenue Total. Add lines 2a-2f 2,641,588 Investment income (including dividends, interest, and 3 other similar amounts) 4,482 Income from investment of tax-exempt bond proceeds 0 5 Royalties (ı) Real (II) Personal Gross rents 6a Less rental expenses 0 Rental income or (loss) Net rental income or (loss) Gross amount from sales of (ı) Securities (II) Other 7a 0 assets other than inventory Less cost or other basis and sales expenses 0 0 Gain or (loss) Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Less. direct expenses 0 c Net income or (loss) from fundraising events Gross income from garning activities 9a See Part IV, line 19 Less direct expenses 0 Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 0 Less cost of goods sold 0 Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue State convention receipts 900099 11a 25,345 900099 45,570 Nat'l Consultant reimb - flow thru 900099 221,982 BCTGM strike donations-flow thru 36,118 All other revenue 329,015 Total, Add lines 11a-11d ol 3,571,554 Total revenue. See instructions

Part IX Statement of Functional Expenses Section 501(c)(2) and 501(c)(4) propriations must semile all cellulars All others.

Secu	on 501(c)(3) and 501(c)(4) organizations must complete all Check if Schedule O contains a response to any o			omplete column (A	}
	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			general emperator	- CAPCHISCS
	organizations in the United States See Part IV, line 21	0		^ 15.	ti .
2	Grants and other assistance to individuals in the			4 7, 4	-
	United States See Part IV, line 22	0		* * .	1
3	Grants and other assistance to governments,			,	
	organizations, and individuals outside the	1		,	*,
_	United States See Part IV, lines 15 and 16	0			-1 ,
4	Benefits paid to or for members	0		- · · · · · · · · · · · · · · · · · · ·	114
5	Compensation of current officers, directors,	ļ			ļ
_	trustees, and key employees	224,680			
6	Compensation not included above, to disqualified		İ		}
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	788,550			
8	Pension plan accruals and contributions (include	Ì	1]
_	section 401(k) and 403(b) employer contributions)	350,200			
9	Other employee benefits .	336,297			
10	Payroll taxes	82,934			ļ
11	Fees for services (non-employees)				
a	Management .	0			
b	Legal .	9,550			ļ
C	Accounting	28,080			ļ <u>-</u>
d	Lobbying	0	The Barran	7 76 254	
e	Professional fundraising services See Part IV, line 17	0	· · · · · · · · · · · · · · · · · · ·		
f	Investment management fees .	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	12,489			ļ
12	Advertising and promotion	13,179		· · · · · · · · · · · · · · · · · · ·	ļ
13	Office expenses	176,943			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	90,216			
17	Travel .	54,203			
18	Payments of travel or entertainment expenses	[Ì
40	for any federal, state, or local public officials	70.050			
19	Conferences, conventions, and meetings .	79,253			
20	Interest	55,600			
21	Payments to affiliates .	647,088			
22	Depreciation, depletion, and amortization Insurance	80,797			<u> </u>
23 24	Other expenses Itemize expenses not covered	24,195	一点 アウスで変数	(" <u>19</u> 9-	to see a management
24	above (List miscellaneous expenses in line 24e If		7. 4.	•	
	line 24e amount exceeds 10% of line 25, column	1 12 12	1, 1	4 <u>4</u> 6 .	± , '
	(A) amount, list line 24e expenses on Schedule O)	,, ,	žb _{iz}	- 1	54 to
а	Register and vote expenses	275,458	·	. 18"	A
a b	BCTGM Lockout Donations - flow thru	205,113			
c	Legislative Fund - 2013	110,041	· ————		
d	National consultant	45,570	 		
e	All other expenses	66,775			
25	Total functional expenses. Add lines 1 through 24e .	3,757,211	0		0
26	Joint costs. Complete this line only if the	5,757,211	 	<u>_</u>	<u> </u>
20	organization reported in column (B) joint costs		[]		
	from a combined educational campaign and		l		ļ
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)	1	ļ		
			<u> </u>		Form 990 (2012)

Form 990 (2012) Minnesota AFL-CIO Part X Balance Sheet

		Check if Schedule O contains a response to any que	stion in this Part X			. [
				(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest-bearing		36,984	1	29,615
	2	Savings and temporary cash investments		589,683	2	453,256
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and former office	cers, directors,	,		
		trustees, key employees, and highest compensated emp	loyees	77.		,
		Complete Part II of Schedule L.	•		5	
	6	Loans and other receivables from other disqualified persons (as def			**	1
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib	uting employers and	ing her in a		S., '., .
		sponsoring organizations of section 501(c)(9) voluntary employees'	beneficiary		<u></u>	10 10 10
Assets		organizations (see instructions) Complete Part II of Schedule L			6	
88	7	Notes and loans receivable, net		0	7	0
⋖	8	Inventories for sale or use	!		8	
	9	Prepaid expenses and deferred charges .			9	
	10a	Land, buildings, and equipment cost or		Table, 1		" " " " " " " " " " " " " " " " " " "
		other basis Complete Part VI of Schedule D 10a	1,548,926	"The distribution of the second		41
	b	Less accumulated depreciation . 10b	370,532	1,250,834	10c	1,178,394
	11	Investments—publicly traded securities		151,926	11	76,926
	12	Investments—other securities See Part IV, line 11		0	12	0
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34	1)	2,029,427	16	1,738,191
	17	Accounts payable and accrued expenses		2,897	17	3,147
	18	Grants payable	•		18	
	19	Deferred revenue .			19	
	20	Tax-exempt bond liabilities	(0 / / / 5		20	ļ
	21	Escrow or custodial account liability Complete Part IV o		The most Taken-28°51'98'69'	21	2 - 一元 / · · · · · · · · · · · · · · · · · ·
Liabilities	22	Loans and other payables to current and former officers,			, Y.	
ij		trustees, key employees, highest compensated employee	es, and			
<u>ia</u>	00	disqualified persons Complete Part II of Schedule L	l mades	020 517	22	900 600
_	23 24	Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third pa	•	930,517	23 24	899,688
	25	Other liabilities (including federal income tax, payables to				<u> </u>
	23	parties, and other liabilities not included on lines 17-24)				Ì
		Part X of Schedule D	Complete	0	25	0
	26	Total liabilities. Add lines 17 through 25		933,414	26	902,835
		Organizations that follow SFAS 117 (ASC 958), check	bara b 🔽 and	300,111	- Jan	
Sa		complete lines 27 through 29, and lines 33 and 34.	There > A and	1, 27	, , "	
Ľ		Unrestricted net assets .		1 001 010	27	925.256
ala	27	Temporarily restricted net assets		1,021,013		835,356
8	28	Permanently restricted net assets			28 29	
Š	29	•		75 That	23	*** XXX
or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check he	re 🕨 💹 and			
		complete lines 30 through 34.		<u> </u>	, a, .	5 Second
Net Assets	30	Capital stock or trust principal, or current funds		ļ	30	ļ
As	31	Paid-in or capital surplus, or land, building, or equipmen			31	
et	32	Retained earnings, endowment, accumulated income, or	r other funds		32	
Z	33	Total net assets or fund balances	•	1,021,013		835,356
	34	Total liabilities and net assets/fund balances		1,954,427	34	1,738,191

	990 (2012) Minnesota AFL-CIO	4	1-0785271	Pag	e 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	11		3,571	 ,554
2	Total expenses (must equal Part IX, column (A), line 25).	2		3,757	
3	Revenue less expenses Subtract line 2 from line 1	3		-185	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,021	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6			
7	Investment expenses .	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	} }			
	column (B))	10		835	,356
Part				,	,
	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 X Cash Accrual Other				10
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O		P 41, pl		型社
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	10 1. 6	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				A CONTRACTOR
	reviewed on a separate basis, consolidated basis, or both				HIE.
	Separate basis Donsolidated basis Both consolidated and separate basis			Hi.	
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis		ţţr.		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of		**************************************	
_	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	1			
	Schedule O		2 14,	170	
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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u> </u>	3b		
			Form	990	(2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions.

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

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

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

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

	e of organization	organizations Complete Part III		Emr	loyer ide	ntification nu	ımber
Mınr	nesota AFL-CIO				•	1-0785271	
		the organization is exempt und	er section 501	c) or is a section 5			
1	Provide a description of	the organization's direct and indirect p		activities in Part IV			
2	Political expenditures			. >	\$		275,458
3	Volunteer hours .						
Pai	rt I-B Complete if	the organization is exempt unc	ler section 501	(c)(3)			
1		excise tax incurred by the organization			\$		
2	-	excise tax incurred by organization m		=	\$		
3	-	red a section 4955 tax, did it file Form	•	-	· · · · · · · ·	Yes	No
	Was a correction made?		· · · · · · · ·		•	Yes	∏ No
	If "Yes," describe in Par				•		
		the organization is exempt unc	ler section 501	(c) except section	501(c)(3	3).	
1		ly expended by the filing organization i			991/9//	<u> </u>	
•	activities				▶ \$		13,708
2		filing organization's funds contributed		ons	·		
_	for section 527 exempt to	· -			▶ \$		261,750
3	Total exempt function ex	xpenditures Add lines 1 and 2 Enter h	here and on Form		• • • • • •		
	line 17b.				\$		275,458
4	Did the filing organization	on file Form 1120-POL for this year?				Yes	X No
5	Enter the names, addre	sses and employer identification numb	er (EIN) of all sect	tion 527 political organi	zations to	which the fi	ling
		nents. For each organization listed, en					
		ontributions received that were promp					
	as a separate segregate	ed fund or a political action committee	(PAC) If additiona	space is needed, pro	vide infor	mation in Pa	nt IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from		(e) Amount of	
			ŀ	filing organization's funds If none, enter -0-		contributions recipromptly and	
			_		ļ	delivered to a s	
				İ		none, enter	
	Madus Amoris	4407 Foot Lake St		<u> </u>			
(1) ^V	Vorking America	4407 East Lake St Minneapolis, MN 55406	1	177	.790		83,960
					,, 30		00,300
(2)			1		İ		
			 			·	
(3)			1				
(4)							
(4)							
(5)			1	Į	ĺ		
				ļ			
(A)				Ì			

Minnesota AFL-CIO	
chedule C (Form 990 or 990-FZ) 201	12

Total lobbying expenditures

Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

d

41-0785271

Sch	edule C (Form 990 or 990-EZ) 2012				11 07 00211	Page 2
Pa	art II-A Complete if the organization under section 501(h)).	is exempt (under section 50	01(c)(3) and filed	Form 5768 (ele	ction
Α	Check ▶ if the filing organization be	longs to an a	ffiliated group (ar	nd list in Part IV e	each affiliated gro	up member's
	name, address, EIN, expe	nses, and sh	are of excess lob	bvina expenditur	es)	-р
В	Check ▶ if the filing organization chi	ecked box A	and "limited cont	ro)" provisions ar	nolv	
	Limits on Lobby			provident up		
	(The term "expenditures" me	ans amounts	paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
la	Total lobbying expenditures to influence publ	ic opinion (gra	ss roots lobbying)			0
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)			0
С	Total lobbying expenditures (add lines 1a and				0	0
d	Other exempt purpose expenditures.					0
е	Total exempt purpose expenditures (add line	s 1c and 1d)			0	0
f	Lobbying nontaxable amount. Enter the amo	•	llowing table in both	า		
	columns) o	0		
ſ	If the amount on line 1e, column (a) or (b) is:	nt is:	4 4			
ı	Not over \$500,000		ting Topic			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000		300
Ì	Over \$1,000,000 but not over \$1,500,000	over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	ver \$1,500,000				
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% o	f line 1f)			0	0
h	Subtract line 1g from line 1a If zero or less,	enter -0-			0	0
i	Subtract line 1f from line 1c If zero or less, e	enter -0			0	0
j	If there is an amount other than zero on either	er line 1h or lin	e 11, did the organiz	ation file Form 472	20 reporting	
•	section 4911 tax for this year?	•				Yes No
_	(Some organizations that m	ade a section	Period Under Sec 501(h) election do uctions for lines 2	not have to comp		
	Lobbyin	g Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount				0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))				M TESTS	0

Schedule C (Form 990 or 990-EZ) 2012

0

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT ((election under section 501(h)).	filed	Forn	n 576	3	Page 3
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)			(b)	
of the Johnson actuals.	Yes	No	А	mount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?	- II		li .	5 _%	-
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes?			*	, r	
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?. j Total. Add lines 1c through 1i	, y"				0
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			All the second	riveno par	fi i i i i i i i i i i i i i i i i i i
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	:)(5), 	or se	ection		
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." 					No X X
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year 	, n	1 2a 2b			
c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	. - -	2c 3			0
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			0
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information. Part II-A Line -2 Register and vote expenses \$261,750 went to "Working America" and an additional \$13,708 for sundry other items. All pertaining to the AFL-CIO Labor 2012 register and vote campaign. NOTE Other political activity is reported on a separate form 990 filed for the "Political Fund" (EIN # 91-2101127)					

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

1e, 11f, 12a, or 12b. Open to

Employer identification number

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

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 1 Total number at end of year . . . 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year). 4 Aggregate value at end of year. 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV Part II , 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 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 а Total acreage restricted by conservation easements . 2b b Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06, and not on a d historic structure listed in the National Register 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 4 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 8 Yes 9 In Part XIII, 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 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 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 XIII, 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X. . 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: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	ile D (Form 990) 2012 Minnesota AFL-CIC						41-078	5271	F	age 2
Part		Collections of A	Art, Histo	orical Tr	easures, o	r Othe	er Similar Ass	ets (cor	tinue	<u></u>
3	Using the organization's acquisition, ac	cession, and other	records, c	heck any	of the follows	ng that	are a significant			
	use of its collection items (check all the	it apply) [.]					_			
а	Public exhibition		d []	Loan	or exchange p	orogran	ns			
b	Scholarly research	·	е 🗌	Other						
С	Preservation for future generation	ns								
4	Provide a description of the organization	on's collections and	explain ho	ow they fu	irther the orga	anızatıc	on's exempt purp	ose in		
	Part XIII									
5	During the year, did the organization so assets to be sold to raise funds rather t	olicit or receive dona than to be maintaine	ations of a	irt, historic	cal treasures, canization's c	or othe	er sımılar ın?	Ye	.s [No
Part								. —		
	IV, line 9, or reported an am				iizalion ans	Weieu	163 101 0111	330, 1 2		
1a	Is the organization an agent, trustee, c				ributions or of	her ac	sets not			
	included on Form 990, Part X?		(CITICULAI)	y ioi coini	ibulions of of	inci as.	3613 1101	☐ Ye	۳ ا	No
b	if "Yes," explain the arrangement in Pa	rt XIII and complete	the follow	vina table			•	۰۰ ب	~ Ш	
				····g ·			1	Amount		
С	Beginning balance .					10	c			0
d	Additions during the year					10	d			
е	Distributions during the year					16	e			
f	Ending balance					1	f			0
2a	Did the organization include an amoun	t on Form 990, Part	t X, line 21	12			,		s X	No
b	If "Yes," explain the arrangement in Pa	rt XIII Check here	if the expla	anation h	as been provi	ided in	Part XIII		M	
Part								0		
ı arı	Endominent under comp.	(a) Current year	(b) Pro		(c) Two years		(d) Three years bac		ur years	back
1a	Beginning of year balance	0		0		ol	(-)	0		
b	Contributions							1		
c	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	0		0		0		0		0
2	Provide the estimated percentage of the	•	balance (I	ine 1g, co	olumn (a)) hel	ld as				
а	Board designated or quasi-endowment	•	%							
b	Permanent endowment	<u></u>								
С	Temporarily restricted endowment	%	07							
0-	The percentages in lines 2a, 2b, and 2	-			bald and ad	m	rad for the			
3a	Are there endowment funds not in the organization by	possession of the o	irganizatio	m mai are	nelo ano ao	ministe	red for the		Yes	No
	(i) unrelated organizations							3a(i)	163	110
	(ii) related organizations				•			3a(ii)		
b	If "Yes" to 3a(ıı), are the related organi	zations listed as rec	ouired on s	Schedule	R?	•		3b	-	
4	Describe in Part XIII the intended uses		•			•	•			
Part										
art	Description of property	(a) Cost or ot			ost or other	(c) Accumulated	(d) B	ook valu	
	_ continue of property	(investm			is (other)		depreciation			
1a	Land .		0		0	2 (V) ()	THE PROPERTY OF			0
b	Buildings		0		1,394,431		259,913		1,13	34,518
C	Leasehold improvements		0		0		0			0
d	Equipment		0		97,693		86,952			0,741
<u>e</u>	Other .		0		56,802	<u> </u>	23,667			33,13 <u>5</u>
Total	. Add lines 1a through 1e (Column (d)	must equal Form 99	<i>ы</i> , Рап X,	. colu <u>m</u> n (ы), line 10(c)	<i>)</i>	•		1,17	78,394

Total. (Column (b) must equal Form 990, Part X. col (B) line 25)

2 FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

	ie U (Form 990) 2012 Minnesota AFL-CIO			41-0785271	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statemen	ts W	ith Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements .		· · · ·	1	4,095,741
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a		1	
þ	Donated services and use of facilities	2b		<u>].</u> · .	
C	Recoveries of prior year grants	2c		1:]	
d	Other (Describe in Part XIII.)	2d	524,187	1 1	
е	Add lines 2a through 2d			2e	524,187
3	Subtract line 2e from line 1			3	3,571,554
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a		i i	
b	Other (Describe in Part XIII)	4b		1	
C	Add lines 4a and 4b			4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).			5	3,571,554
Part	XII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expenses p	er Return	
1	Total expenses and losses per audited financial statements			1	4,281,398
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	1		
b	Prior year adjustments	2b		1.~	
C	Other losses	2c		1 1	
d	Other (Describe in Part XIII.)	2d	524,187		
е	Add lines 2a through 2d			2e	524,187
3	Subtract line 2e from line 1		•	3	3,757,211
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		}		
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a			
b	Other (Describe in Part XIII)	4b		1.	
С	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	3,757,211
Pari	XIII Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III, fin	es 1a and 4, Part I	V, lines 1b and	1 2b,
	/, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also				
	onal information	•			
Part :	(I Line 2d - Political expenses reported on a separate form 990 (91-2101127)				
	(III				
Pan	(II Line 2d - Political expenses reported on a separate form 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.

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Minnesota AFL-CIO

Employer identification number

41-0785271

Form 990 Part VI Section A Line - 6 and 7a Affiliated Organizations send member delegates to
the Bi-annual convention based on per capita payments made. Delegates vote on constitutional
items and elect a Predident and Secretary / Treasurer to administer the ongoing operations. A
General Board made up of representatives from the affiliated organizations acts as the
oversight body between conventions
Form 990 Part VI Section B Line -11a - The form 990 is reviewed by the elected
Secretary/Treasurer prior to being submitted to the IRS
Form 990 Part VI Section B Line -15a - Salaries of the President and Secretary/Treasurer are
determined at the convention bi-annually.
Form 990 Part VI Section B Line -19 - Governing documents, policies, and financial statements
would be made available upon authorized formal request
Form 990 Part XII Line -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

Part I

Related Organizations and Unrelated Partnerships

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

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1	Open to Public	Inspection

OMB No 1545-0047

Employer identification number

41-0785271

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

(a) Name, address, and EIN (if applicable) of disregarded entity) Priman	(b) Primary activity Lega	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(5)						
(4)					-	
(5)						
(9)						
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had	L S (Complete of the	ne organization a	nswered "Yes" to	Form 990, Par	t IV, line 34 beca	ause it had
one or more related tax-exempt organizations during the tax year.)	the tax year.)					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						Yes
(1) MN AFL-CIO Political Fund 91-2101127 175 Aurora Avenue St Paul, MN 55103	Political fund	Z	252			
318507	ifle Holding Company MN	Z	501(c)(2)			× ×
			(=\(\frac{1}{2}\)			
(4)						
(9)						
(9)						
(7)						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schedule B	Schedule R (Form 990) 2012

HTA

Schedule R (Form 990) 2012

Page 2 Percentage (i) Section 512(b)(13) controlled ownership ž Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Yes 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.) managing partner? ŝ General or (h) Percentage ownership Yes 41-0785271 amount in box 20 of Schedule K-1 Code V-UBI (Form 1065) (g) Share of end-of-year assets (h)
| Disproportonate ž (f) Share of total income Yes (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year Share of total Income (d)

1 Direct controlling entity Predominant income (related, unrelated, sections 512-514) excluded from tax under (c)
Legal domicile
(state or foreign country) (d)
Direct controlling (b) Primary activity (c)
Legal
domicile
(state or
foreign
country) Minnesota AFL-CIO Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Schedule R (Form 990) 2012 Part IV Part III ල **a** ල (5) 9 \mathbf{E} Ξ 3 3 2 **a** 9

Schedule R (Form 990) 2012

8

41-0785271

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

Minnesota AFL-CIO

Schedule R (Form 990) 2012

Z Z	Note . Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			_	Yes	ş
-	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?	izations listed in Pa	arts II-IV?	-	-	
æ	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		×
Φ	Gift, grant, or capital contribution to related organization(s)			1 0		×
υ	Gift, grant, or capital contribution from related organization(s).			10	-	×
ס	Loans or loan quarantees to or for related organization(s).		•	19		×
•	October of John State of the College of the Colle			5	\mid	>
ע	Logis of logit guarantees by refated organization(s)			ַ עַ		راً إِنَّ
-	Dividends from related organization(s)			=	\vdash	×
σ	Sale of assets to related organization(s)			5		×
, E	Purchase of assets from related organization(s)			두		×
-	Exchange of assets with related organization(s)			7		×
-	Lease of facilities, equipment, or other assets to related organization(s)			Į.		×
					,	
×	Lease of facilities, equipment, or other assets from related organization(s)			¥	×	
-	Performance of services or membership or fundraising solicitations for related organization(s)	٠		=	7	\times
Ε	Performance of services or membership or fundraising solicitations by related organization(s)			T m		×
C	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).			e E	×	
0	Sharing of paid employees with related organization(s)			10	×	
						7
۵	Reimbursement paid to related organization(s) for expenses	٠		10	-	×
σ	Reimbursement paid by related organization(s) for expenses .			19	+	×
_	Other transfer of cash or property to related organization(s)			-	1	$_{\times} $
S				18	-	×
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, inc	ding covered relatio	including covered relationships and transaction thresholds	threshold	g	
	(a)	(q)		9	_	
	Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	eterminir volved	ē.
=	H Z C Z					
(2)						-
9		-				
2						
(4)						1
(2)						
(9)						
			Schedule	Schedule R (Form 990) 2012	990) 2(12

Part VI

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?	thers n (3) ions?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(1) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
				Yes	o _N			Yes No		Yes No	
(1)				,		 					
(2)											
(6)											
(4)											
(5)											
(9)											
(2)											
(8)											
(6)		i									
(10)											
(11)											
(12)											
(13)							_				
(14)		}									
(15)											1
(16)											1
									Sched	Schedule R (Form 990) 2012	990) 2012

Schedule R (Fo		Minnesota AFL-CIO		<u>41-0785271</u>	Page 5
Part VII	Supplen	nental Information			
	Complete	e this part to provide	additional information for responses to questions on	Schedule R (see	
	instructio	ons).		•	

	·		•		
			•		

Continuation Sheet for Form 990

Name of the Organization Minnesota AFL-CIO

Employer identification number

41-0785271

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

Compensated Emp	oyees											
(A) Name and title	(B)	Posit	ion ()) chac		that ap	nh.)	(D)	(E)	(F)		
Name and the	Average hours per week					-	Ť	Reportable compensation from	Reportable compensation from related	Estimated amount of other		
	(list any hours for related organizations below dotted line)	ndividual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ner	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(26) Debra Holder	1 00											
Ed MN 7250 - East Central		X	_	Ļ	↓_	<u> </u>	↓_					
(27) Marybeth Juetten	1 00	1										
AFSCME - East Central	4.00	X	├-	┝	┢╌	├	╁	ļ <u> </u>				
(28) Steve Raatikka SMWIA - East Central	1 00	x	ļ									
(29) Julie Blaha	1 00		┝	├	╁	├	╁					
Ed MN - Mpls Metro		X										
(30) Mike Zagaros	1 00		\vdash	 	\vdash	 	-	 	 			
NALC - Mpls Metro		X				ļ	ł					
(31) Tim Donovan	1 00	_	✝	\vdash	 	 	+					
CWA - Mpls Metro		X		1				ŀ				
(32) Mary Falk	1 00	_				T	T		1			
AFSCME - Mpls Metro		X										
(33) Teferi Fufa	1 00											
Ed MN - Mpls Metro		X		L	L	<u> </u>			<u> </u>			
(34) Linda Hamilton	1 00	2		l								
MNA - Mpls Metro		X		↓_	<u> </u>	_	↓_					
(35) Paul Mueller	1 00	-1		l								
Ed MN - Mpls Metro	ļ. <u>-</u>	X	<u> </u>	↓_	ļ	↓		<u> </u>		ļ		
(36) Terry Nelson	1.00	-			l							
IUPAT - Mpls Metro	100	X	-		⊢	├	+					
(37) Rodger Kretman	1 00	-1	1	1	1	1	-			l		
IBEW - Mpls Metro	1 00	X	\vdash	╁	╁	┼	+	 	-			
(38) Cliff Poehler AFSCME - Mpls Metro	1	X		l						ĺ		
(39) Michelle Sommers	1 00	+	 -	+	十	1	+-	 				
ATU - Mpls Metro	1	x	1	1	1		1	1	1			
(40) Lee Hiller	1 00		Т	\vdash	1	T	1	<u> </u>	 			
IUOE - SE	1	X		l								
(41) Jim Kottke	1 00	+	Г		T							
USW - NE		X	L									
(42) Craig Olson	1 00	2		Γ								
IUPAT - NE		X			上	<u> </u>	_					
(43) John Rebrovich	1.00	-1										
USW - NE		X	1	↓_	$oxed{igspace}$	1	1_					
(44) Ida Rukavina	1 00	• 1		1						•		
AFSCME - NE		X	\vdash	╀	\vdash	-	+	ļ	-			
(45) Jennifer Schultz	1 00	- 1	1									
Ed MN - NE	100	X	┼	┼-	+	-	╁	 	 	-		
(46) Judy Wahlberg	1 00	X										
AFSCME - NE	<u> </u>	<u> </u>	L	<u></u>	_	Щ.	Ь	<u> </u>				

Continuation Sheet for Form 990

Page 2 of 3

Name of the Organization
Minnesota AFL-CIO

Employer identification number

Part VII Section A

Continuation of Officers, Directors, Trustees, Key Employees, and Highest

(A)	(B)	İ			C)			(D)	(E)	(F)
Name and title	Average	Posi	tion (chec	k all	that app	ly)	Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below dotted line)	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
(47) Joe Cerar	1 00									
Education MN - SE	1	х	١	١						
(48) Russell Hess	1 00	_	\vdash	Г						
LIUNA - SE		x	ļ	\	ļ	1				
(49) Oscar Sletten	1 00			T	T-					
IUOE - SE		×	ļ		ļ					
(50) Michael Murphy	1 00	_	T	\vdash	T	\vdash			†	
IBEW - SE		X]	
(51) Jeff Birttnen	1 00	_	t	一	t	1 1	_			
AFSCME - St Paul	1	x							[i	l:
(52) Mike Buesing	1.00	_	╁╾	╁	╁╌	╅┈═┪	_	<u> </u>		
AFSCME - St Paul	1.00	х								
(53) John Ewaldt	1 00		-	\vdash	╁	1 -1				
AFSCME - St Paul		x		1		i i				•
(54) Deb Haugen	1 00		┢	\vdash	⊢	╂╼╂		 -	 	
MNA - St Paul	1 00	X						}		
(55) Warren Harder	1 00		┢	\vdash	+-	+		 -	<u> </u>	
IUPAT - St Paul	<u>' 00</u>	X								
(56) Richard Magler Jr	1 00	+	 	╁╌	╁╴	+				
Education MN - St Paul		X	Ì	}	1	i i				
(57) Roy Magnuson	1 00	_	╁	├	╁	+		 -	 	
Education MN - St Paul	1.00	x	1	1	1	1 1				
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(58) Jamie McNamara	}	Į.	[1	1 1		1		
IBEW - St Paul	1.00	X	╁╾	ļ	₩	+	_	ļ.— . -	 	
(59) Gerry Parzino	1 00		l							
USW - St Paul	1.00	X	\vdash	├-	╀	├		<u> </u>	 	
(60) Stan Theis	1 00	l v			ļ					
UA 34 - St Paul	1.00	↓ ^	┼—	┢	}—	╁┼				
(61) Kent Courrier	1 00									
IUOE 49 - West	 	X	├	-	╄	+			 	
(62) Dale Moerke	1 00	l .								
UFCW - West	ļ	X	⊢		╄	+				
(63) Jeff Offutt	1 00	t								
Education MN - West	↓	X	╙	Ļ	Ļ	\vdash			 	
(64) Kevin Olson	1 00	1		1	1	[[1	•
AFSCME 701 - West	ļ <u></u> -	LX.	ــــ	<u> </u>	<u> </u>	oxdot		L		
(65) Tony St Michel	1 00	1	1	1		1 1			1	
BCTGM - West		L X	$ldsymbol{oxed}$	<u>L</u>	lacksquare	1	_	L		
(66) Francisco Altamirano	1 00		1			1 1			1	
LCLAA / UPAT - Const Grp		LX.	$oxed{oxed}$	_	$oldsymbol{oldsymbol{oldsymbol{eta}}}$	1				
(67) Lance Lindeman	1.00	1	}		1			l		
COPE - OPEIU	l	X				1 1				

Continuation Sheet for Form 990

Page 3 of 3

Name of the Organization
Minnesota AFL-CIO

Employer identification number 41-0785271

Part VII Section A

Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Emp	loyees									
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per		Т	$\overline{}$		that ap	_	Reportable	Reportable	Estimated
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from	compensation from related	amount of other
	(list any	rect	utio	ğ	ğ	est	ם	the	organizations	compensation
	hours for related	9 =	nal	i	ō	le S		organization	(W-2/1099-MISC)	from the
	organizations	ste	trus		1 %	Pe		(W-2/1099-MISC)		organization and related
	Delow dolled	•	tee			sate				organizations
	line)	1	Ì	1	Ì	l ¤				
(68) Rick Ryan	1 00	_	\vdash		┢╌		╁╌	<u> </u>		
COPE - IAMAW		х			ļ					
(69) Tom Thornberg	1 00	 	\vdash	_	1	t —	\vdash			
COPE - IAFF		Х	ł			ļ				
(70) Mona Meyer	1.00						1			<u> </u>
CWA		х]	ĺ	ĺ	Į				
(71) Walt Federickson	1 00					Γ	Г			
MNA		X		١.	L					
(72) Jamie Gulley	1 00						Г			
SEIU		X				Ĺ				
(73) Bernie Hesse	1 00						Π			
UFCW		X		L	L.	<u> </u>			l	
(74) Jane Nygaard	1 00]		Ì	Ì	1				
AFGE		X		乚	_	<u> </u>				
(75)						ļ				
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Form 8868

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you a	re filing for an Automatic 3-Month Extensio re filing for an Additional (Not Automatic) 3 <i>mplete Part II unless</i> you have already bee	-Month Ex	tension, complete only Part II (on pa	age 2 of this form	► X n) Form 8868
Electronic a corporate 8868 to red Return for	filing (e-file). You can electronically file For on required to file Form 990-T), or an addition quest an extension of time to file any of the formasfers Associated With Certain Personal s). For more details on the electronic filing of	m 8868 if y nal (not aut orms listed Benefit Coi	ou need a 3-month automatic extensionatic) 3-month extension of time. You part I or Part II with the exception of tracts, which must be sent to the IRS	on of time to file ou can electronic of Form 8870, Inf in paper format	(6 months for cally file Form formation
Part I	Automatic 3-Month Extension of	Time. Onl	v submit original (no copies need	led)	
A corporat Part I only All other co	on required to file Form 990-T and requesting the components of th	g an autom	natic 6-month extension—check this b 	ox and complete o request an ext	. ▶ 🗍
Type or	······································				ion number (EIN) or
print	- I			1-0785271	
File by the due date for	Number, street, and room or suite no. If a P.O.	box, see in		Social security no	umber (SSN)
	175 Aurora Avenue			,	(,
filing your return See instructions	City, town or post office, state, and ZIP code St Paul	For a foreigi	eign address, see instructions MN 55103		
Enter the Return code for the return that this application is for (file a separate application for each return)					. 01
Application Is For		Return Code	Application Is For	Return Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation) 07		
Form 990-BL		02	Form 1041-A		
Form 4720 (individual)		03	Form 4720		
Form 990-PF		04	Form 5227		
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069		11
Form 990-T (trust other than above)		06	Form 8870		12
Telephi If the o If this is for the who list with the I rec	oks are in the care of Steve Hunter one No ► 651-227-7647 rganization does not have an office or place of for a Group Return, enter the organization's ole group, check this box e names and EINs of all members the extens quest an automatic 3-month (6 months for a control of the organization's return for the organization's return for calendar year or	four digit (If it is for plant is for. corporation	Group Exemption Number (GEN)		If this is and attach a he extension
▶ [] 2 <u> If t</u> h	tax year beginning 4/1/2 e tax year entered in line 1 is for less than 12			3/31/2013 Final retui	
	Change in accounting period			<u></u>	·
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$				
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$					\$ 0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.					\$ 0
	you are going to make an electronic fund withdra				