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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

A For	+ha 20	013 calendar year, or tax year beginning 10-	01-2013 , 2013, and end	ing 00-20-2	2014			
	ck ıf app	C Name of organization	01-2013 , 2013, and end	ilig 09-30-2	2014	D Employe	er ider	ntification number
_	ress char	Milliesota Com Glowers Association						
_	ne chang	Doing Business As				41-136	9512	2
_	al return			D				
_	nınated	Number and street (or P O box if mail is 738 First Avenue East	not delivered to street address)	Room/suite		E Telephon	e num	ber
_	ended ret	turn City or town, state or province, country, a	and ZID or foreign postal code			(952)2	33-0	333
_	ication p	Shakopee, MN 55379	and 21P of foreight postal code					
ДРРІ	ication p	F Name and address of principa	Lofficar	<u> </u>		<b>G</b> Gross rec		· ·
		A dam Birr	Tomcer	'		nis a group r ordinates?	eturn	for
		738 First Avenue East Shakopee, MN 55379						
		Sliakopee, MN 33379				all subordina ided?	ates	│ Yes │ No
Тах	-exempt	t status	t no )	527			list	(see instructions)
We	ebsite:	► http://www.mncorn.org/			Gro	up exemptio	n nun	nhar <b>b</b>
					1			
<b>(</b> Form	of orga	nization Corporation Trust Association	Other 🟲		<b>L</b> Year of f	ormation 1978	B M M	State of legal domicile N
Par	t I	Summary						
	<b>1</b> Br	riefly describe the organization's mission or	most significant activities					
		entify and promote opportunities for corn g						
۲ I	_							
[	_							
∄	<b>2</b> CF	heck this box 🛌 if the organization discon	tinued its operations or di	enosed of n	nore than	25% of its n	et ac	cate
aovemance	<b>2</b> Cr	neck this box 🖣 - If the organization discon	tinued its operations or di	sposea or n	nore than	25% OF ILS II	iet as	sets
	<b>3</b> Nu	umber of voting members of the governing b	ody (Part VI, line 1a) .			.	3	18
ğ l	<b>4</b> Nu	umber of independent voting members of th	e governing body (Part VI,	line 1b) .		[	4	18
}	<b>5</b> To	otal number of individuals employed in cale	ndar year 2013 (Part V, Iır	ne 2a) .		[	5	13
Activities &	<b>6</b> To	otal number of volunteers (estimate if neces	ssary)				6	500
۹	<b>7a</b> To	otal unrelated business revenue from Part V	III, column (C), line 12				7a	3,000
		et unrelated business taxable income from					7b	879
			<u> </u>	Τ		or Year		Current Year
	8	Contributions and grants (Part VIII, line 1	h)	ŀ			0	0
							~	U
9	9	Program service revenue (Part VIII, line 2		F		5.338.77	<del>-</del>	
venue		Program service revenue (Part VIII, line 2 Investment income (Part VIII, column (A)	g)	[		5,338,77	73	5,134,152
Revenue	10	Investment income (Part VIII, column (A)	g)			6,68	73	5,134,152 7,000
Revenue	10 11		g) • • • • • • • • • • • • • • • • • • •	 1e)			73	5,134,152 7,000 167,379
Revenue	10 11 12	Investment income (Part VIII, column (A) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line		6,68 144,18 5,489,64	73 39 32 44	5,134,152 7,000 167,379 5,308,531
Revenue	10 11 12	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) 1(A), line		6,68 144,18	7 3 3 9 3 2 4 4 1 8	5,134,152 7,000 167,379
Revenue	10 11 12 13 14	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line		6,68 144,18 5,489,64	73 39 32 44	5,134,152 7,000 167,379 5,308,531
	10 11 12 13 14 15	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line		6,68 144,18 5,489,64 1,175,51	7 3 3 9 3 2 4 4 L 8 0	5,134,152 7,000 167,379 5,308,531 1,149,236
	10 11 12 13 14 15	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line ), lines		6,68 144,18 5,489,64	7 3 3 9 3 2 4 4 L 8 0	5,134,152 7,000 167,379 5,308,531 1,149,236
	10 11 12 13 14 15	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line ), lines		6,68 144,18 5,489,64 1,175,51	73 39 32 44 18 0	5,134,152 7,000 167,379 5,308,531 1,149,236
Expenses	10 11 12 13 14 15 16a b	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line ), lines		6,68 144,18 5,489,64 1,175,51 1,058,00	73 339 32 44 18 0	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473
Expenses	10 11 12 13 14 15 16a b	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e)  (A), line		6,68 144,18 5,489,64 1,175,51 1,058,00	73 339 332 44 L8 0	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473 0
Expenses	10 11 12 13 14 15 16a b 17 18	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line		6,68 144,18 5,489,64 1,175,51 1,058,00 2,988,30 5,221,82	73 39 32 14 18 0 0 7 0	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473 0
Expenses	10 11 12 13 14 15 16a b 17 18	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line	Beginnin	6,68 144,18 5,489,64 1,175,51 1,058,00	7 3 3 9 3 2 4 4 L 8 0 0 0 0 1 0 1 0 1 L 8 L 8 L 8 L 8 L 8 L 8 L 8 L 8 L 8 L	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473 0 2,621,194 4,996,903 311,628
Expenses	10 11 12 13 14 15 16a b 17 18	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line	_	6,68 144,18 5,489,64 1,175,51 1,058,00 2,988,30 5,221,82 267,81 ag of Current	73 39 32 14 18 0 0 0 7 0 0 1 26 18	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473 0
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Expenses	10 11 12 13 14 15 16a b 17 18 19	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e) (A), line ), lines ne 25)	_	6,68 144,18 5,489,64 1,175,51 1,058,00 2,988,30 5,221,82 267,81 ag of Current Year 3,367,46 1,278,61	7 3 3 9 3 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	5,134,152 7,000 167,379 5,308,531 1,149,236 0 1,226,473 0 2,621,194 4,996,903 311,628 End of Year
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Met Assets of Expenses that Balances Expenses	10 11 12 13 14 15 16a b 17 18 19 20 21 22 t III penalt owledger has	Investment income (Part VIII, column (A)) Other revenue (Part VIII, column (A), lines Total revenue—add lines 8 through 11 (mu 12)	g)	1e)  (A), line  , , , , , , , , , , , , , , , , , , ,	ng schedul n officer) is	6,68 144,18 5,489,64 1,175,51 1,058,00 2,988,30 5,221,82 267,81 ag of Current Year 3,367,46 1,278,61 2,088,85 es and state based on a	73 39 32 44 18 0 0 7 0 0 1 26 18 15 15 11 11 11 11 11 11	2,62 4,99 31 End of Year 3,57 1,17 2,40 ts, and to the bermation of whice

Firm's address ► 800 Nicollet Mall Ste 1300

Mınneapolis, MN 554027033

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

Use Only

Phone no (612) 253-6500

. Ves No

including grants of \$

4e Total program service expenses ►

(Expenses \$

) (Revenue \$

Part IV	Checklist of	Required	Schedules
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			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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 $I^{\bullet}$	3	Yes	
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, Part III	5	Yes	
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 "Yes," complete Schedule D, Part 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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 negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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		No
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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		No
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? <i>If "Yes," complete Schedule J.</i>	23	Yes	
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 25a	24a		No
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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV		1	1
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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 VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

αı	Check if Schedule O contains a response or note to any line in this Part V			г
	Check if Schedule O contains a response of note to any fine in this part v	<u> </u>	Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   66			
)	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b 0			
:	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
3	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
ı	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	163	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
ı	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		N
	If "Yes," enter the name of the foreign country ►	1		
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	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).			
	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		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources 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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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	13a		
)	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			
	Enter the amount of reserves on hand	Į		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Check if Schedule O contains a response or note to any line in the	hıs Part VI .							.I

	ection A. Governing Body and Management					
					Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	1a	18			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	<b>1</b> b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		Νo
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management coi			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the oi	rganız	zation's assets? .	5		No
6	Did the organization have members or stockholders?			6	Yes	
	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not	requ	ired by the Internal D	eveni	ie Cod	۵ ۱
			irea by the internal n	CVCIII	ac cou	c.,
	· · · · · · · · · · · · · · · · · · ·		ned by the internal N	CVC//C	Yes	No No
10a	Did the organization have local chapters, branches, or affiliates?			10a		
10a			s of such chapters,			No
10a b	Did the organization have local chapters, branches, or affiliates?	 tivitie on's e	s of such chapters, exempt purposes?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization than the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e	s of such chapters, exempt purposes? erning body before filing	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov	s of such chapters, exempt purposes? erning body before filing 	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form S	s of such chapters, exempt purposes? Terning body before filing The services of the services o	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form 9	s of such chapters, exempt purposes? Terning body before filing	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Ford the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e s gov form 9	s of such chapters, exempt purposes? Perning body before filing P90 Perests that could give Policy? If "Yes," describe	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	tivitie on's e s gov form S ly inte	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Ford the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? Perning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov Form 9 ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form 9 ly inte the p	s of such chapters, exempt purposes? Perning body before filing P90 Perests that could give Policy? If "Yes," describe Policy? If "Yes," describe Policy? If "Yes," describe Policy? If "Yes," describe	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form 9 the p the p iew ar ie deli	s of such chapters, exempt purposes? Ferning body before filing  990	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form 9 the p the p iew ar ie deli	s of such chapters, exempt purposes? Ferning body before filing  990	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- List the States with which a copy of this Form 990 is required to be filed►
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - ☐ Own website ☐ Another's website ☑ 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 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 ►Suzanne Swenson 738 First Avenue East Shakopee, MN 55379 (952)460-3605

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

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

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

- ◆ 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, or 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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Ryan Buck	15 00	х		х				7,519	0	(
President	0 00			Ĺ				7,519	Ŭ	
(2) Bruce Peterson	5 00	×		x				6,889	0	(
Vice President	0 00			<u> </u>				2,203		
(3) Noah Hultgren	5 00	×		х				6,112	0	(
Treasurer (4) Jean Knakmuhs	0 00									
	5 00	x		x				4,964	0	(
Secretary (5) Charles Degrote	0 00									
-		х						6,256	0	(
Board Member (6) Tom Haag	0 00									
•		х						9,384	0	(
Board Member (7) Paul Henning from Feb 2014	0 00									
		x						0	0	(
Board Member (8) Kırby Hettver from Feb 2014	0 00									
Board Member	0 00	X						0	0	(
(9) John Luepke	2 00									
Board Member	0 00	X						6,213	0	(
(10) John Mages	2 00									
Board Member	0 00	Х						7,466	0	(
(11) Gerald Mulder	2 00									
Board Member	0 00	×						5,443	0	(
(12) Gary Purath	2 00									
Board Member	0 00	X						1,203	0	(
(13) Brian Thalmann	2 00	Ţ.,								
Board Member	0 00	X						5,388	0	(
(14) Dale Tolifson	2 00	,,						C 434		,
Board Member	0 00	Х						6,174	0	(
(15) Tim Waibel	2 00	х						5,114	0	(
Board Member	0 00							3,114		
(16) Tim Wiersma from Feb 2014	2 00	х						0	0	(
Board Member	0 00							Ů	0	
(17) Harold Wolle Jr	2 00	×						5,679	0	(
Board Member	0 00	^						3,079	U	,

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers and	than on is	one bot	not box h ar	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount o compen from	ated of other sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz	lated
(18) Les Anderson	2 00	x						4,590	0		0
Board Member (19) Richard Rohrer thru Aug 2013	0 00 2 00										
` ,		х						2,100	0		0
Board Member (20) Greg Schwarz thru Jan 2014	0 00 2 00										
Board Member	0 00	Х						7,252	0		0
(21) Steve Sodeman thru Jan 2014 Board Member	2 00	×						6,944	0		0
(22) DeVonna Zeug thru Dec 2013	2 00	х						6,207	0		0
Board Member (23) Tım Gerlach	0 00 50 00			Х				162,227	0		23,692
Executive Director/CEO (24) Suzanne Swenson	0 00 50 00										
Senior Finance Director	0 00			Х				97,605	0		16,475
1b Sub-Total								370,729	0		40,167
Total number of individuals (including be \$100,000 of reportable compensation f				d ab	oove	•) who	rec		<u> </u>		10,107
3 Did the organization list any former office	cer, director or	trustee	e kev	em/	ınlay	vee. o	r hia	ihest compensate	d employee	Yes	No
on line 1a? If "Yes," complete Schedule J	•						•		з		No
4 For any individual listed on line 1a, is the organization and related organizations of individual									om the	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									ndividual for 5		No
Section B. Independent Contracto	rs										
Complete this table for your five highest compensation from the organization Re	t compensated									stax year	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
Portage Marketing 2401 Sheridan Ave S Minneapolis MN 55416	Project Management & Advertising	887,279
Combest Sell & Associates 4908 92nd Street Lubbock TX 79424	Education & Lobbying Consulting	157,500

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

Part V	100	Statement o						
		Check if Schedu	ule O contains a respor	nse or note to any lir I				<u> </u>
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
u E	1a	Federated camp	paigns 1a					
tributions, Gifts, Grants Other Similar Amounts	b	Membership du	es <b>1b</b>					
. B. C.	С	Fundraising eve	ents <b>1</b> c					
Gifts, iilar Ai	d	Related organiz	ations 1d					
nii3	e	Government grants						
Contributions, and Other Sim	_	_						
utic Per	Т	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
	g	Noncash contribution 1a-1f \$	ons included in lines					
Con	h	Total. Add lines	s 1a-1f					
				Business Code				
nne	2a	Reimburs From M	N CRPC	900099	4,491,968	4,491,968		
e ve	Ь	Membership Dues		900099	467,936	467,936		
e E	С	Convention Income		900099	98,675	98,675		
7. A.	d	Variety Plots Incom	ne	900099	18,365	18,365		
Ø ⊊	е		_					
Program Serwce Revenue	f	All other progra	ım service revenue		57,208	57,208		
Š	g	Total. Add lines	s 2a – 2f		5,134,152			
	3		ome (including dividen		3,131,132			
		and other simila	aramounts)	🟲 📗				
	4		tment of tax-exempt bond	proceeds				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	213,000	(II) Fersonal				
	Ь	Less rental	83,120					
	c	expenses Rental income	129,880					
	а	or (loss)	me or (loss)	<u> </u>	129,880		3,000	126,880
	u	Net rental medi	(ı) Securities	(II) Other	,		•	,
	7a	Gross amount from sales of assets other		7,000				
	b	than inventory Less cost or other basis and sales expenses		0				
	С	Gain or (loss)		7,000				
	d	Net gain or (los	s)		7,000			7,000
Other Revenue	8a	Gross income fi events (not incl \$	luding s reported on line 1c)					
- -			а	38,551				
Ě			penses b	1,052	37,499			37,499
,	c 9a			events <b>p</b> -	37,499			37,499
	Ь	Loca direct con	penses b					
			loss) from gaming acti	uties <b></b>				
		Gross sales of returns and allo	inventory, less owances .					
	L	loco castif	a and sold					
			oods sold <b>b</b> loss) from sales of inve	entory <b>L</b>				
		Miscellaneous		Business Code				
	11a							
	ь		_					
	С		_					
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions .	🖊	5,308,531	5,134,152	3,000	171,379

d

25

26

e All other expenses

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► following SOP 98-2 (ASC 958-720)

	990 (2013)				Page <b>1</b> 0
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ione muet com	olete column (A.)	
, ecti	Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,149,236			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	411,330			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	606,529			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	40,258			
9	Other employee benefits	95,700			
0	Payroll taxes	72,656			
1	Fees for services (non-employees)				
а	Management				
b	Legal	3,750			
c	Accounting	12,780			
d	Lobbying	103,000			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	710,963			
2	Schedule O)	· · · · · · · · · · · · · · · · · · ·			
2 3	Office expenses	514,791 269,098			
<i>3</i> 4		· ·			
<del>4</del> 5	Information technology	6,015			
5 6		E9 200			
	Occupancy	58,398			
.7 .8	Travel	277,914			
9	Conferences, conventions, and meetings	73,218			
0	Interest	21,932			
1	Payments to affiliates	21,732			
2	Depreciation, depletion, and amortization	116,189			
2 3	Insurance	37,776			
.s 24	Other expenses Itemize expenses not covered above (List	31,176			
	miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Dues & Subscriptions	226,110			
b	A wards	131,722			
С	Repairs & Maintenance	52,505			

5,033

4,996,903

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in t	hıs Par	tx			· ·
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments		•	174,566	2	1,087,327
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,354,170	4	713,201
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	rt II of			5	
×	6	Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and cand sponsoring organizations of section 501(c)(9) voluntary er organizations (see instructions) Complete Part II of Schedule I	ontribi nploye	uting employers		6	
Assets	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			19,137	9	36,859
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1	2,405,996			
	ь	Less accumulated depreciation	10b	663,679	1,819,595	10c	1,742,317
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11		13	_		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11		•		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34).			3,367,468	16	3,579,704
	17	Accounts payable and accrued expenses			323,521	17	244,862
	18	Grants payable		•	020,021	18	211,002
	19	Deferred revenue			396,477	19	398,396
					330,477	20	330,330
	20	Tax-exempt bond liabilities					
ies S	21	Escrow or custodial account liability Complete Part IV of Sche				21	
Liabiliti	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
<u>.</u>		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•	558,619	23	535,967
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Pa		25			
	26	D			1,278,617		1,179,225
	26	Total liabilities. Add lines 17 through 25			1,278,017	26	1,179,225
φ Φ		Organizations that follow SFAS 117 (ASC 958), check here ►   lines 27 through 29, and lines 33 and 34.	√ and (	complete			
<u>e</u>	27	Unrestricted net assets			2,088,851	27	2,400,479
<u>ର</u>	28	Temporarily restricted net assets	•		_,555,561	28	_,,
<u></u>	29	Permanently restricted net assets	•	•		29	
Š		Organizations that do not follow SFAS 117 (ASC 958), check he	are be	· · — and		-2	
<u>.</u>		complete lines 30 through 34.	~ F	unu			
0	30	Capital stock or trust principal, or current funds				30	
Assets or Fund Balance	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ASS	32	Retained earnings, endowment, accumulated income, or other f				32	
Š	33	Total net assets or fund balances			2,088,851	33	2,400,479
Ž	34	Total liabilities and net assets/fund balances			3,367,468	34	3,579,704
	ı – ·			-	1 5,557,700	J-7	5,575,754

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,3	308,531
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,9	996,903
3	Revenue less expenses Subtract line 2 from line 1	3		3	311,628
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,0	088,851
5	Net unrealized gains (losses) on investments	5		<u> </u>	
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,4	100,479
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

DLN: 93493104006315

OMB No 1545-0047

**Political Campaign and Lobbying Activities** 

**SCHEDULE C** (Form 990 or 990-EZ)

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. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	ame of the organization nnesota Com Growers Association	n		Employer i	ident	ification numl	oer
D	T. A. Commisso if the		-d	41-13695			
Pal		ne organization is exempt ur			2/	organizatio	on.
1	•	the organization's direct and indirect	: political campaign ac	tivities in Part IV			
2	Political expenditures			•	:	\$	0
3	Volunteer hours						0
Pai	rt I-B Complete if th	ne organization is exempt ur	nder section 501	(c)(3).			
1	Enter the amount of any	excise tax incurred by the organizati	ion under section 495	5 I	<b>-</b> 9	\$	
2	Enter the amount of any	excise tax incurred by organization i	managers under secti	on 4955 I	•	\$	
3	If the organization incur	red a section 4955 tax, did it file For	m 4720 for this year?	•		☐ Yes	┌ No
4a	Was a correction made?					☐ Yes	┌ No
b	If "Yes," describe in Par	tIV					
Pai	rt I-C Complete if th	ne organization is exempt ur	nder section 501	(c), except section	501	L(c)(3).	
1	Enter the amount directl	y expended by the filing organization	for section 527 exen	npt function activities	<b>-</b> 9	\$	10,466
2		filing organization's funds contribute	d to other organizatioi	ns for section 527			
	exempt function activities			•	;	\$	1,925
3	Total exempt function ex	openditures Add lines 1 and 2 Enter	r here and on Form 11	20-POL, line 17b ▶	<b>-</b>	\$	12,391
4	Did the filing organizatio	n file <b>Form 1120-POL</b> for this year?				☐ Yes	√ No
5	organization made paym amount of political contr	ses and employer identification num ents For each organization listed, er ibutions received that were promptly d or a political action committee (PA	nter the amount paid for and directly delivered	rom the filing organizatio d to a separate political (	n's fu organ	ınds Also ent nızatıon, such	er the
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0		(e) A mount of contributions and promp directly delive separate programization enter-	received tly and ered to a olitical If none,
	Minnesota Corn Growers ociation Federal PAC	738 1st Ave E Shakopee, MN 55379	27-1156398	8,5:	38		1,075
	Minnesota Com Growers ociation State PAC	738 1st Ave E Shakopee, MN 55379	27-0444457	1,9	28		850

Sch	nedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
Pä	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l <b>.</b> )		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

	and "Was" was a see to be a fact to be seen to be seen to be seen to be a seen to be seen as the seen as	(a	1)	(b)	)
	r each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying tivity.		No	Amo	unt
L	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?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
: :	Media advertisements?				
e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
) 1	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
•	Other activities?				
	Total Add lines 1c through 1i				
ı	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
,	If "Yes," enter the amount of any tax incurred under section 4912				
-	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section !	501(c	)(5), c	r secti	on
_	501(c)(6).				
	Were substantially all (90% or more) dues received nondeductible by members?			1 Yes	-
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		⊢	2	-
	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?		⊢	3	+
Ŧ	t III-B Complete if the organization is exempt under section 501(c)(4), section 5	501/6	\(5\) c		
: •	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
	Dues, assessments and similar amounts from members	1			
	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	2a			
1					
	Carryover from last year	2b			
•	Total	2c			
)	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	$\vdash$			
2	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2c			
<b>b</b>	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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	2c			
:	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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?	2c 3			
b c	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions)	2c 3			
rc	Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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?  Taxable amount of lobbying and political expenditures (see instructions)  art IV Supplemental Information  Evident the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grounds)	2c 3 4 5	Part II	-A, line 2	2, an
b c Pa	Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  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?  Taxable amount of lobbying and political expenditures (see instructions)  art IV Supplemental Information	2c 3 4 5	Part II	-A , line 2	2, an
b c Pa	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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?  Taxable amount of lobbying and political expenditures (see instructions)  art IV Supplemental Information  Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1 Also, complete this part for any additional information	2c 3 4 5	Part II	-A, line 2	2, an
Pa	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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?  Taxable amount of lobbying and political expenditures (see instructions)  art IV Supplemental Information  Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1 Also, complete this part for any additional information	2c 3 4 5	Part II	-A, line 2	2, an
o ro	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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?  Taxable amount of lobbying and political expenditures (see instructions)  art IV Supplemental Information  Evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in the part II-B, line 1 Also, complete this part for any additional information	2c 3 4 5	Part II	-A , line 2	2, ar

201104410 3 (1 3111 330 31 330 12) 2013		i age <del>-i</del>
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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#### DLN: 93493104006315

OMB No 1545-0047

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

	me of the organization nesota Corn Growers Association			oyer identification number
Pa	rt I Organizations Maintaining Donor Ad	vised Funds or Other Similar		369512 or <b>Accounts</b> . Complete if the
	organization answered "Yes" to Form 990			
		(a) Donor advised funds	(	<b>b)</b> Funds and other accounts
•	Total number at end of year			
2	Aggregate contributions to (during year)			
}	Aggregate grants from (during year)			
	Aggregate value at end of year			
•	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	<del>-</del>	onor advis	Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?			purpose <b>Yes No</b>
Pai	rt III Conservation Easements. Complete if	f the organization answered "Yes"	' to Form	990, Part IV, line 7.
<u>?</u>	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of a	a certified	cally important land area historic structure of a conservation
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	neid at the End of the Year
a b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified hist	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) accommodate structure listed in the National Register	• •	2d	
;	Number of conservation easements modified, transfer	red, released, extinguished, or termina	ated by the	organization during
	the tax year 🛌			
ļ	Number of states where preparty subject to conservat	tion occoment is located by		
	Number of states where property subject to conservat			unlations and
•	Does the organization have a written policy regarding enforcement of the conservation easements it holds?			☐ Yes ☐ No
,	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation eas	ements du	uring the year
	<b>-</b>			
,	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easemer	nts during	the year
	<b>▶</b> \$			
1	Does each conservation easement reported on line 2( and section $170(h)(4)(B)(II)^{2}$	d) above satisfy the requirements of s	ection 17	0(h)(4)(B)(I)
)	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	ne footnote to the organization's financi		
ar	<b>t III</b> Organizations Maintaining Collection Complete if the organization answered "\		, or Oth	er Similar Assets.
.a	If the organization elected, as permitted under SFAS: works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education	n, or resea	rch in furtherance of public
b	If the organization elected, as permitted under SFAS : works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, education		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of art, historical following amounts required to be reported under SFAS			'
a	Revenues included in Form 990, Part VIII, line 1	, , ,		<b>►</b> \$
b	Assets included in Form 990, Part X			<b>▶</b> \$

Раг	Organizations Maintaining Co	nections of Art,	, nis	tori	cai ir	easu	res, or o	tne	r Similar	<u> ASSE</u>	ts (co	<u>ntinued)</u>
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	neck	any of t	he foll	owing that a	are a	significant i	ıse of	ıts	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	er the c	organization	's ex	empt purpos	se in		
	Part XIII											
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ular	Γ.	Yes	┌ No
Par	Part IV, line 9, or reported an am						n answere	d "Y	es" to Forn	n 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	ford	ontribu	itions (	or other ass	ets r	not	Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able		_					
										Amou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							Γ.	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	exnla	anati	on has	heen n	rovided in l	Part '	XIII			$\sqcap$
Pa	rt V Endowment Funds. Complete i										• •	
		(a)Current year		<b>)</b> Prior					Three years ba		Four ye	ears back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1 g	, colum	n (a)) l	held as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment <b>F</b>											
c	Temporarily restricted endowment											
•	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation '	that	are held	d and a	idministere	d for	the			
	organization by  (i) unrelated organizations								Г	3a(i)	Yes	No
	(ii) related organizations			•				•	<u> </u>	Ba(ii)		
ь	If "Yes" to 3a(II), are the related organization							•	' · · · [	3b		
4	Describe in Part XIII the intended uses of th								_			
Par	t VI Land, Buildings, and Equipme	nt. Complete if t	he o	rgar	ıızatıoı	n ansv	vered 'Yes	' to	Form 990,	Part	IV, lır	ne
	11a. See Form 990, Part X, line 1	<u>LO.</u>					T					
	Description of property				) Cost or iis (inves		( <b>b)</b> Cost or o basis (othe		(c) Accumula depreciatio		( <b>d</b> ) Bo	ok value
1a	Land						111	,834				111,834
b	Buildings						1,599	,849	30:	1,631		1,298,218
С	Leasehold improvements						3	,991		3,991		0
d	Equipment						629	,542	328	3,362		301,180
е	Other						60	,780	2:	9,695		31,085
	I. Add lines 1a through 1e (Column (d) must e	aual Form 990. Part >	K, colu	mn (	B), line	10(c).)			🕨			1,742,317

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>+</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
<b>Part X Other Liabilities.</b> Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Adjustments

83,120

Part X		Revenue per Audited Financial Statements With Revenue poswered 'Yes' to Form 990, Part IV, line 12a.	er R	<b>eturn</b> Complete ıf
1 7		ner support per audited financial statements	1	782,765
	· -	out not on Form 990, Part VIII, line 12		·
		stments		
	<del>-</del>	facilities		
		nts		
	• • • •	)		
	Add lines <b>2a</b> through <b>2d</b>	· <del></del>	2e	-4,609,938
	•		3	5,392,703
		90, Part VIII, line 12, but not on line 1		
		cluded on Form 990, Part VIII, line 7b . 4a		
	·	)		
	·		4c	-84,172
		nd <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	5,308,531
Part X		Expenses per Audited Financial Statements With Expenses	per	
		nswered 'Yes' to Form 990, Part IV, line 12a.		
1 7	Total expenses and losses p	er audited financial statements	1	471,137
2 /	Amounts included on line 1 b	out not on Form 990, Part IX, line 25		
a [	Donated services and use of	facilities		
<b>b</b> F	Prior year adjustments .			
<b>c</b> (	Otherlosses			
d (	Other (Describe in Part XIII	)		
<b>e</b> /	Add lines <b>2a</b> through <b>2d .</b>	<del></del>	2e	0
3 9	Subtract line <b>2e</b> from line <b>1</b>		3	471,137
4	Amounts included on Form 9	90, Part IX, line 25, but not on line <b>1:</b>		
a I	nvestment expenses not inc	cluded on Form 990, Part VIII, line 7b 4a		
<b>b</b> (	Other (Describe in Part XIII	) 4b 4,525,766		
c A	Add lines <b>4a</b> and <b>4b</b>	<del></del>	4c	4,525,766
<b>5</b> T	Total expenses Add lines <b>3</b>	and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	4,996,903
Part X	Supplemental Ir	nformation		
	line 4, Part X, line 2, Part X	or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b II, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
Part X, L		The Association has been recognized by the Internal Revenue Service (II income taxes under Section 501(a) of the Internal Revenue Code as an of Section 501(c)(5). The Association is annually required to file a Return of Income Tax (Form 990) with the IRS. In addition, the Association is subjuincome that is derived from business activities that are unrelated to its et association files an Exempt Organization Business Income Tax Return (Interport its unrelated business taxable income. The Association believes the support for any tax positions taken affecting its annual filing requirements have any uncertain tax positions that are material to the financial statem recognize future accrued interest and penalties related to unrecognized to income tax expense if such interest and penalties are incurred. The Association for years before 2010.	rganiz f O rga ect to xempt Form 9 nat it l s, and ents - ax ben ciation	ration described in inization Exempt from income tax on net purpose. The 190-T) with the IRS to has appropriate as such, does not The entities would efits and liabilities in no longer subject to
A djustm		Membership expenses netted with revenue on financial statements -178, netted with revenue on financial statements -4,431,778  Special event expenses netted with revenue for tax purposes -1,052 Re		
A djustm	Line 4b - Other ents , Line 4b - Other	netted with revenue for tax purposes -1,052 Re netted with revenue for tax purposes -83,120 Membership expenses netted with revenue on financial statements 178,1		
ı aıı All,	, Line TD - O tilel	promporanty expenses nected with revenue on infancial statements 170,1	. U U I*I	CIVILO EXPENSES

netted with revenue on financial statements 4,431,778 Rental property expenses netted with revenue for tax purposes -1,052 Rental property expenses netted with revenue for tax purposes -

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493104006315

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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(Form 990 or 990-EZ)

SCHEDULE G

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV. lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** Name of the organization Minnesota Corn Growers Association 41-1369512 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply e ☐ Solicitation of non-government grants Mail solicitations Internet and email solicitations f Solicitation of government grants Phone solicitations g | Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Γ Yes Γ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No

3	List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut						
		3 . 3	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))			
d)			(event type)	(event type)	(total number)				
Ē	1	Gross receipts	38,55	1		38,551			
Revenue	2	Less Contributions	(						
_	3	Gross income (line 1 minus line 2)	38,55	1		38,551			
	4	Cash prizes							
ဟ	5	Noncash prizes							
Expenses	6	Rent/facility costs	1,05	2		1,052			
졄	7	Food and beverages .							
Drea	8	Entertainment							
ā	9	Other direct expenses .							
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n(d)		(1,052)			
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)		37,499			
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	art IV, line 19, or rep	orted more than			
Revenue	1	Gross revenue	(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
		Cash prizes							
Expenses		Non-cash prizes							
		Rent/facility costs							
Direct									
		Other direct expenses  Volunteer labor	Г Yes% Г No	Г Yes% Г No	Г Yes% Г Nо	_			
		Direct expense summary Add line  Net gaming income summary Subt			<b>.</b>				
9 a b	If "No," explain								
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes  b If "Yes," explain									

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g <sup>,</sup>			· Fyes [	– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility			<del></del>		%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name <b>▶</b>					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	<b>T</b> Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (	distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear <b>⊳</b> \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

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DLN: 93493104006315

Schedule I (Form 990)

### Grants and Other Assistance to Organizations, Governments and Individuals in the United States

2013

OMB No 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Inspection

Name of the organization						Employer identification	on number
Minnesota Corn Growers Association	1					41-1369512	
Part I General Information	on on Grants and	Assistance				•	
Does the organization maintain the selection criteria used to a Describe in Part IV the organiz	ward the grants or ass ation's procedures for	istance? monitoring the use of	grant funds in the Unite	d States			✓ Yes
<b>Part II Grants and Other A</b> Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

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Schedule I	(Form 990) 2013	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inform	nation. Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.

Part IV Supplemental I	<b>morniation.</b> Fromue the information required in Fact 1, line 2, Fact 111, column (b), and any other additional information.
Return Reference	Explanation
Part I, Line 2	Most of the grants awarded by the organization are sponsorships. The Producer Services team accepts rquests for sponsorships three times a year
	Requests are evaluated by the Producer Services team based on how it relates to the organization's mission and the level of funding requested and how
	it benefits the organization. Invoices are reviewed and approved by a staff team lead and funds are monitored as required in each contract

Schedule I (Form 990) 2013

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 41-1369512

Name: Minnesota Corn Growers Association

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Des Moines Area Community College 2006 S Ankeny Rd Ankeny,IA 50023	23-7229486	501(c)(3)	5,000				education & awareness

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
MN Agricultural & Rural Leadership SW MN State University 1501 State Marshall, MN 56258	23-7108470	State of Minnesota	45,500				education & awareness	

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN 4 H 9 Coffey Hall 1420 Eccles Ave St Paul, MN 55108	41-1408161	501(c)(3)	5,000				scholarships		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Agriculture in the Classroom PO Box 385906 Bloomington, MN 55121	41-1587595	501(c)(3)	39,000				education & awareness		

orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Farmers Union 600 County Rd D W Suite 14 St Paul, MN 55112	41-6041830	501(c)(5)	14,500				education & awareness		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN FFA Foundation PO Box 118 Rosemount, MN 55068	41-6038263	501(c)(3)	18,300				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN State Fair 1265 Snelling Ave N St Paul, MN 55108	41-2013696	501(c)(3)	9,000				education & awareness

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN Tech Engineering Edu Assn 3223 Cleveland Street NE Minneapolis, MN 55418	45-4535072	501(c)(3)	8,000				education & awareness

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SD Rancher Relief Fund PO Box 231 Rapid City, SD 57709	36-3608635	501(c)(3)	10,000				charitable	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
South Central College Foundation 1920 Lee Blvd N Mankato,MN 56003	41-1649572	501(c)(3)	5,000				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
American Coalition for Ethanol 5000 S Broadband Lane Suite 224 Sioux Falls, SD 57108	45-0407345	501(c)(6)	12,000				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Farm and Food Alliance 108 Marty Dr Suite 1 Buffalo, MN 55313	46-0596611	501(c)(6)	20,000				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Farm Policy Facts PO Box 596 Arlington,VA 22216	20-8921012	501(c)(4)	100,000				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Growth Energy 17220 Wright St Suite 150 Omaha,NE 68130	26-3542537	501(c)(6)	20,000				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN AgriGrowth Council 408 St Peter St St Paul, MN 55102	41-0991212	501(c)(6)	6,000				education & awareness		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Association of Wheat Growers 2600 Wheat Dr Red Lake Falls, MN 56750	41-1284889	501(c)(5)	5,606				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Beef Research & Promotion Council 2950 Metro Dr 102 Bloomington, MN 55425	41-1230774	State of Minnesota	35,000				education & awareness & research		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Cattlemans Association 255 E Kellogg Blvd 102 St Paul, MN 55101	41-1343011	501(c)(5)	5,500				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Farm Bureau 3080 Eagandale Pl Eagan, MN 55121	41-0417230	501(c)(5)	118,500				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Milk Producers Association 108 Marty Dr Suite 2 Buffalo, MN 55313	41-1469481	501(c)(6)	7,500				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Pork Producers Association 151 St Andrews Ct Suite 810 Mankato, MN 56001	20-0399755	501(c)(5)	5,000				education & awareness		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MN Soybean Growers Association 151 St Andrews Ct Suite 710 Mankato, MN 56001	51-0178016	501(c)(5)	5,000				education & awareness		

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MN Wheat Council & Research Promotion 2600 Wheat Dr Red Lake Falls, MN 56750	41-1307519	State of Minnesota	18,850				education & awareness			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Renewable Fuels Association 1 Massachusetts Ave NW Suite 820 Washington, DC 20001	52-1203707	501(c)(6)	5,000				education & awareness		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	` '	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	, ,	(h) Purpose of grant or assistance		
MN Department of Agriculture 625 N Robert St St Paul, MN 55155		State of Minnesota	6,000				education & awareness		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
University of Minnesota 1300 S Second St Suite 266 Minneapolis, MN 55455	41-6007513	State of Minnesota	17,500				education & awareness & research		

Form 990,Schedule 1, Pa	Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Jeffrey Beckman 35028 30th Avenue Dennison, MN 55018	90-0294415		50,000				education & awareness			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
BMEC Inc 1822 43rd St SW Mason City,IA 50423	45-2620821		8,035				education & awareness	

Form 990, Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Deer Creek Speedway PO Box 591 Grand Meadow, MN 55936	41-2018224		31,000				education & awareness			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Elko Holding Co PO Box 246 Elko,MN 55020	41-1990260		35,700				education & awareness		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Innovative Marketing 218 S Linton Street Blue Earth, MN 56013			12,000				education & awareness	

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Portage Marketing 1445 Lakeview Ave S Minneapolis, MN 55416	41-1980463		230,500				education & awareness		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Severs Corn Maze 15900 Flying Cloud Dr Eden Prairie, MN 55347	41-1883167		50,000				education		

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#### DLN: 93493104006315

## OMB No 1545-0047

#### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

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Name of the organization Minnesota Corn Growers Association **Employer identification number** 

41-1369512

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses descr			1b		
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Executi			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	appl	y Do not check any boxes for methods			
	Compensation committee	굣	Written employment contract			
	☐ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	t VII	I , Section A , line $1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	men	nt?	4a		No
b	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-base	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must of	omi	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the revenues of					
а	The organization?			5a		
	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the net earnings of	e 1 a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," desc			7		
8	Were any amounts reported in Form 990, Part VII, paid	ora	accured pursuant to a contract that was			
	subject to the initial contract exception described in Re					
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958-6(c)$ ?	butt	able presumption procedure described in Regulations	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

1								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation  (i) Base		(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990	
	(i) (ii)		0	2,428 0	9,600		187,023 0	0

Schedule J (Form 990) 2013

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

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DLN: 93493104006315

OMB No 1545-0047

2013

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

41-1369512

Name of the organization Minnesota Corn Growers Association

990 Schedule O, Supplemental Information

Return Reference	Explanation								
Form 990, Part VI, Section A, line 1									
Form 990, Part VI, Section A, line 4	The Association updated its governing documents to allow for changes within the districts in order to add counties in northern Minnesota								
Form 990, Part VI, Section A, line 6	The Association's membership is open to all individuals and corporations who have an interest in supporting the common purposes of Minnesota corn producers								
Form 990, Part VI, Section A, line 7a	Duly appointed delegates from county associations and members of the association elect the association's Board of Directors								
Form 990, Part VI, Section B, line 11	The Association's executive committee reviews the Form 990 in depth with key staff and the independent auditor. The Form 990 is then presented to the full board before it is filed with the IRS.								
Form 990, Part VI, Section B, line 12c	The Association has a Conflict of Interest policy annual statement where each director, of ficer, and member of a committee with board delegated powers shall complete and sign the statement at the time of his or her initial election or appointment and annually thereafter. The Association also conducts periodic reviews of the policy to ensure that it operates in a manner consistent with its purposes. If a conflict is determined to exist by those me mbers who do not have a conflict, the interested person must leave the board or committee meeting during the discussion of, and the vote in, the proposed transaction or arrangement resulting in the conflict of interest. All proceedings related to conflicts of interest a re-documented in the meeting minutes.								
Form 990, Part VI, Section B, line 15a	The Personnel Committee, which is comprised of independent persons, uses a salary survey to determine compensation for the executive director. A written contract is approved by the Personnel Committee. This procedure was last performed in 2012 for the executive director. The executive director reviews and determines the compensation for the Senior Finance. Director. The Association uses salary surveys and Form 990s of other similarly situated exem pt organizations to determine the compensation of other officers, including the Senior Finance. Director. This procedure was last performed in 2014.								
Form 990, Part VI, Section C, line 19	The Association makes its governing documents, conflict of interest policy, and financial statements available to the public upon request								
Form 990, Part IX, line 11g	Stipends 199,980 Per Diem Fees 41,498 Miscellaneous Professional Fees 469,485								

#### DLN: 93493104006315

2013

OMB No 1545-0047

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# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Minnesota Corn Growers Association

(Form 990)

**SCHEDULE R** 

**Employer identification number** 41-1369512

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	End-	<b>(e)</b> -of-year assets	[	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt O or more related tax-exempt organizations du	rganizations Complete If	the organization ar	swered "Yes	s" on	Form 990, P	art IV,	line 34 because it l	had oı	ıе
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code s	(d) Exempt Code section		status (c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co	
1) Minnesota Corn Research and Promotional Council	Research	MN						Yes	N   N
38 First Avenue East									
hakopee, MN 55379 3-1026869									
2) Minnesota Corn Growers Association Federal PAC	Political Organization	MN	527				Minnesota Corn Growers	Yes	T
38 First Avenue East							Association		
hakopee, MN 55379 7-1156398									
3) Minnesota Corn Growers Association State PAC	Political Organization	MN	527				Minnesota Corn Growers Association	Yes	T
38 Fırst Avenue East							Association		
hakopee, MN 55379 7-0444457									
									T
									T
							1	1	1

Part III	<b>Identification of Related Org</b> because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income		re of Disproprof of-year allocation		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	j) eral or agıng :ner?	<b>(k)</b> Percentage ownership
						,			Yes	No		Yes	No	
												_		
													$\square$	
Part IV	<b>Identification of Related Org</b> line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	( <b>a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	Legal domicile state or foreign		(e) Type of entit (C corp, S corp, or trust)		total Share	(g) e of end- -year ssets		(h) ercentage wnership	(i) Section 51: (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
<b>1</b> D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations	sted in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		No				
b	Gift, grant, or capital contribution to related organization(s)			1b		No				
c	Gift, grant, or capital contribution from related organization(s)			<b>1</b> c		No				
d	Loans or loan guarantees to or for related organization(s)			1d		No				
e	Loans or loan guarantees by related organization(s)			1e	Yes					
f	Dividends from related organization(s)			1f		No				
g	Sale of assets to related organization(s)			1g		No				
h	Purchase of assets from related organization(s)			1h		No				
i	i Exchange of assets with related organization(s)									
j	Lease of facilities, equipment, or other assets to related organization(s)			1j	Yes					
k Lease of facilities, equipment, or other assets from related organization(s)										
l Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
0	Sharing of paid employees with related organization(s)			10	Yes					
р	Reimbursement paid to related organization(s) for expenses			<b>1</b> p		No				
q	Reimbursement paid by related organization(s) for expenses			1q	Yes					
r	Other transfer of cash or property to related organization(s)			1r	Yes					
s	Other transfer of cash or property from related organization(s)			1s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including c  (a) (b)	<del></del>	(d)							
	Name of related organization  Transaction type (a-s)	(c) Amount involved	Method of determining amo	ount ii	nvolved					

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

## Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013