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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For th	e 2014 ca	lendar year, or tax yea	beginning	4/1	/2014	, and e	nding	3/	/31/2015	•	
<u>B</u>	Check if	applicable	C Name of organization	Minnesota	AFL-CIO					er identificati	on number	
	Address	change	Doing business as									
	Name ch		Number and street (or P	O box if mail is no	t delivered to stre	et address)	Room/suite	4	1-07852	71		
		·	175 Aurora Avenue				<u> </u>	E	Telepho	ne number		
	Initial ret	ntu	City or town			State	ZIP code	6	51-227-7	7647		
	Final return	n/terminated	St Paul			<u>//N</u>	55103		01-221-1	041		
			Foreign country name	Foreig	n province/state/co	ounty	Foreign postal					
Ш	Amende	i return						- 0	Gross re	eceipts \$	3,28	32,193
	Application	on pending	F Name and address of pri	ncipal officer				H(a) Is this	a aroup retur	n for subordinate	s? Yes	X No
								1	-	ates included?	Yes	No
	Tax-exem	-1 -1-1-1	501(c)(3) X 501(c) (5)·	(insert no)	1047/->/4		1		list (see instru	L L	
		·	50 1(c)(3)[X] 50 1(c) (3) ·	(insert no)	4947(a)(1)	or 527	} " "	o, attaon a	1131 (300 1113110		
<u> </u>	Website	<u>:</u> ▶						H(c) Grou	exemption	n number 🕨 🖰	1338	
K	Form of o	rganization	Corporation	rust X Assoc	ation Othe	r 🕨	L Yea	ar of formation	n 195	5 M State	of legal domicile	MN
	Part I	Sur	mmary									
	1	Briefly de	escribe the organization	n's mission of	most significa	ant activitie	s To se	ecure legi	slation w	hich enhan	ces the	
ဦ		rights, se	ecurity and welfare of	vorkers and o	ganized labor	and to op						
na Ta		inimical f	to these objectives									
Activities & Governance	2	Check th	nis box 🕨 if the o	rganization dis	continued its	operations	or disposed	of more t	han 25%	of its net a	esets	
Ś	3		of voting members of	•		•	о, аюросса	011110101		3	100010	74
త	,		of independent voting			•	 VI line 1h)			4		72
es	-		mber of individuals em					•		5		15
<u>×</u>	ء ا		mber of volunteers (es	•	-	4 (1 ait v, 11	ne zaj	•	•	6		120
<u> </u>	7a		related business reven			 1 line 12				7a		0
2015	l 'a		elated business taxable		•	-			•	7b		$\frac{0}{0}$
707	-	Netune	ialed business taxable	income nom	1 01111 990-1, 11	116 04			rior Year	10	Current Year	
∞	8	Contribu	tions and grants (Part	VIII line 1h)				<u>_</u>		18,128		73,269
EC 0 Revenue	9		service revenue (Parl		•		. `			38,011		3,417
رة ق	10		ent income (Part VIII, o		-2-4nd-7	41	•	-	2,0	3,098		4,274
DEC	11	Other re	venue (Part VIII, colun	n (A) Ingels		or and 11e	١			58,219		11,233
	144		enue—add lines 8 throug							77,456		32,193
\bigcirc	12		and similar amounts pa				IC 12)		5, 17	0	3,20	0
荆	13	Grants a	paid to or for member	IN THE TANKE	6,2015					0		 0
5	14						S 10\		1 4	 -	1 02	<u> </u>
A	15		other compensation, en				5 5 10)	_	1,47	79,622 0	1,03	37,379
\times \	16a	Profession	onal fundraising fees (art IX, colum	DAI Mie Oi e	<u>'</u>		ļ				
SCANNED Expenses	l b		draising expenses (Pa				0		1 20	0,139	1.62	5,210
			penses (Part IX, colun enses Add lines 13–1				25)			69,761		2,589
	18		e less expenses Subtr			iiii (A), iiiic	20)			07,695		0,396
	19	Revenue	less expenses Subii	act line_10 itol	11 11116 12			Reginning	of Currer		End of Year	0,000
Net Assets or	20	Total acc	ets (Part X, line 16)					Dogmini		1,830		6,844
88/8	20		ulities (Part X, line 26)				.			8,779		4,189
3 5	21		ets or fund balances S		from line 20		•			13,051		2,655
				ubtract line 21	HOIT III 20				1, 1-	10,0011		2,000
Link Link	art II	Sigi	nature Block I declare that I have examin	ad this seture inch	idina accompanyi	na schedules	and statements	and to the b	est of my k	nowledge		
and	belief, it is	s true, correc	ct, and complete Declaration	of preparer (other	than officer) is ba	sed on all info	rmation of which	preparer ha	as any knov	vledge		
			1:17 11:2							315		
Si			Signature of officer	_=					Date		<u> </u>	
He	re		Steve Hunter, Secreta	rv/Treasurer								
		, , ,	Type or print name and title									
		Print/	Type preparer's name		Preparer's signa	ture		Date			PTIN	
Pa	id	_			1)	1/1	m CPA	44.45		Check X	1	
	eparer	Gary	W Paulson		- Ju	Jam Se	-1, -1,7			self-employed	P00484716	
	e Only	Firm's	s name	ulson, CPA				Fu	m's EIN 🕨	41-16438	69	
	,		s address ► 4962 Black	Spruce Trail N	<mark>IW, Ha</mark> ckensa	ick, <u>MN 5</u> 6	452	Pi	one no	320-630-9	166	
Ma	y the IR	S discuss	this return with the pr	eparer shown	above? (see i	nstructions)				X Yes	No

Fo <u>rm</u> 9	90 (2014)	Minnesota AFL-CIO	41-0785271	Page 2
P.a	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly d	escribe the organization's mission		
•	To secu	re legislation which enhances the rights, security and welfare of workers and ed labor and to oppose legislation inimical to these objectives		
2	Did the	organization undertake any significant program services during the year which were not listed on		
2	the prior	r Form 990 or 990-EZ? describe these new services on Schedule O	Yes	X No
3	services		Yes	X No
4	Describe expense	describe these changes on Schedule O e the organization's program service accomplishments for each of its three largest program services es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alle expenses, and revenue, if any, for each program service reported		
4a	(Code Legi) (Expenses \$ including grants of \$) (Revenu slative	e \$)
	lobby the le acted Secu entiti Minn Repr	an effort spanning two legislative session, our work to coordinate a grass roots ying campaign to increase the minimum wage in Minnesota resulted in success as egislature raised the minimum wage for the first time in 9 years. The legislature also don another one of our priorities when they passed the Women's Economic with Act (WESA). We also worked in coalition with a number of private and public es (MOVE Minnesota) in an effort to significantly increase transportation funding in esota. After the 2014 elections sent a Republican majority to the State House of esentatives, our work shifted to (successfully) preserving the gains we had made in revious session of the Legislature.		
	Polit	ical		
	unior the N of tra	siderable effort was put into educating and mobilizing the members of our affiliated as to support our endorsed candidates in the 2014 elections. Using a grant from lational AFL-CIO we established a Path to Power program which hosted a number linings around the state for union members interested in someday running for call office.		
	Orga	nizing		
	to as indus manu	lired a Strategic Organizing Director and a Strategic Organizing Research Director sist our affiliates in their organizing efforts. We were also able to kick off an strial apprenticeship program to help train the workers needed to fuel our sfacturing and industrial sectors. Also new is a program to provide mentorships to en entering the building and construction trades.		
	Conv	vention		
	cand CIO a	osted our Constitutional Convention in September Delegates voted on political date endorsements, passed resolutions to guide the work of the Minnesota AFL-and elected (or reelected) the officers, executive board and general board of the ration		
	State	Fair		
		oordinated the planning and activities of our affiliates at the Minnesota AFL-CIO r Pavilion at the Minnesota State Fair		
	Com	munication		
	Upda	dition to the ongoing work of the Communications staff – the weekly email Labor te, press releases and interviews etc we started a podcast, Minnesota Works		
4d	(Expens		0_)	
4e	Total pr	ogram service expenses • 0		

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			
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	3	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	 _	
Ŭ	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	İ		i
	Part III	_ ا		l
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	_X	
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		Ì	
	"Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-	 	<u> </u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	- <u>-</u> -		<u> </u>
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV	9_		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			ļ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	X	
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		Х
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII .	12a	Х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
.5	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		İ	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		ŀ	
	If "Yes," complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 -	<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24		\ <u>'</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		X
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Χ
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			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
	to defease any tax-exempt bonds?	24c	ŀ	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		Ì	
	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	230		
	current or former officers, directors, trustees, key employees, highest compensated employees, or		ŀ	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		_X_
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	, , , , , , , , , , , , , , , , , , ,	28b		Х
		.		.,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c	-	X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23	-	
	conservation contributions? If "Yes," complete Schedule M	30	l	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	22		~
	If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	- 1	Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,		$\neg \uparrow$	
	III, or IV, and Part V, line 1	34	X	
	, , , ,	35a		Х
	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	1	Х
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	000	-+	
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			•
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	+	<u>X</u>
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	,	
		38	X	014

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V. Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3 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? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return 15 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Χ If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a Х If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?. 7c If "Yes," indicate the number of Forms 8282 filed during the year d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? . 8 Sponsoring organizations maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . 9b 10 Section 501(c)(7) organizations. Enter. 10a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter 11a Gross income from members or shareholders а 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 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? . . . Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans. . . 13c Enter the amount of reserves on hand C 14a Х Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part VI

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

Sec	tion A. Governing Body and Management				
1-	Enter the number of voting members of the			Yes	No
ıa	Enter the number of voting members of the governing body at the end of the tax year	1a 74			
	If there are material differences in voting rights among members of the governing body, or			1	
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
h	·			1	İ
b	Enter the number of voting members included in line 1a, above, who are independent	1b 72	1	ļ ·	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	ship with		1	
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	the direct			
_	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3	ļ	Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	as filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's a	assets?	5		Х
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	,			
	stockholders, or persons other than the governing body?		7b	<u> </u>	Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n during			
	the year by the following	-	7.	[
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sect	tion B. Policies (This Section B requests information about policies not required by the	Internal Revenue (ode)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	•			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt put		10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?.	11a		Χ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g		12b		Χ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes, "		ŀ	
	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13		_X_
14	Did the organization have a written document retention and destruction policy?		14		Х
15	Did the process for determining compensation of the following persons include a review and approve	al by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation a	and decision?	٠,,		•
а	The organization's CEO, Executive Director, or top management official		15a	_X	
b	Other officers or key employees of the organization	:	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		. [
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement		n 1	
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the following the organization of the second seco		,	Ì	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeg	uard		ł	
	the organization's exempt status with respect to such arrangements?		16b		-
	List the states with which a copy of this Form 990 is required to be filed ► N o n e				
17 18	List the states with which a copy of this Form 990 is required to be filed ► N o n e Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Section 501/a)/3\			
.0	available for public inspection. Indicate how you made these available. Check all that apply	= 1 (Section 50 f(c)(S):	5 OHIY	,	
		olaın ın Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	•	v and	4	
. •	financial statements available to the public during the tax year	oor or interest point	y, and	•	
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records	•		
	Store United	651-227-7647	-		
	175 Aurora Avenue, St. Paul, MN 55103				

Part VII		anton Turnto	1			1				41-07852	271 Page 7
Part VII	Compensation of Officers, Dir Employees, and Independent		es, r	۱ey	En	npı	oyee	S, I	Highest Comp	ensated	
	Check if Schedule O contains a	response or no	te to	an	y lii	ne i	n this	s P	art VII		
Section A.	Officers, Directors, Trustees, Key										
	this table for all persons required to be	elisted Report co	mpei	nsat	ion	for t	he ca	len	dar year ending	with or within the	:
organization'	-										
List all of compensa	l of the organization's current officers, on the officers, on the officers, on the officers, on the officers, on the officers, of the officers, officers, on the officers, off	directors, trustees	s (Who	ethe	rind	aid divid	duals	or c	organizations), re	gardless of amo	unt
	of the organization's current key empl						defin	itior	of "kev emplove	ee "	
 List the 	e organization's five current highest co	mpensated empl	oyees	s (ot	her	tha	n an c	offic	er, director, trust	ee, or kev emplo	yee)
	d reportable compensation (Box 5 of Fo and any related organizations	orm VV-2 and/or B	OX / (of Fo	orm	109	9-MI	SC)	of more than \$1	00,000 from the	
•	of the organization's former officers, k	ev emplovees, ar	nd hid	ihes	t co	amo	ensat	ed e	emplovees who r	eceived more th	an
\$100,000 of	reportable compensation from the orga	nization and any	relate	d o	gar	nıza	tions				
	of the organization's former directors										the
•	more than \$10,000 of reportable comp		_						J		
	in the following order individual trustee demployees, and former such persons	is or directors, ins	ititutio	onai	trus	stee	s, oπi	cer	s, key employees	s, nignest	
	nis box if neither the organization nor ar	ny related organiz	ation	cor	npe	nsa	ted a	าง ด	current officer dir	ector or trustee	
		1			-	C)		,, -		00.0., 000.00	
					Pos	ition					
	(A) Name and Title	(B) Average	box,	unles	s pe	rson	than o	an	(D) Reportable	(E) Reportable	(F) Estimated
		hours per week (list any		т-	_	lirect	or/trust oo ⊥	ee)	compensation from	compensation from related	amount of other
		hours for related	Individual to	stitu	Officer	ey er	ghes	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		organizations below dotted	Individual trustee or director	Institutional trustee	•	nplo	yee Yee	-	(W-2/1099-MISC)	, , , , , , , , , , , , , , , , , , , ,	organization and related
		line)	uste	trus		yee	npen				organizations
			"	ee e			Highest compensated employee				
(1) Sharyl	e Knutson	40 00				-				-	
President			Х		Х				119,792		12,639
(2) Steve	Hunter	40 00									
Sec/Treas (3) Todd F), fob!	1 00	X		Х	<u> </u>			111,651	· · ·-	23,314
(3) Todd F LIUNA	rulai II	.	Х								
(4) John F	Rebrovich	1 00								<u>-</u> -	
USW			Χ								
	/barra	1 00	х								
UA Tom K	oehler	1 00	^		_	-		_			
IBEW			Х								
	ohnson	1 00									
IUOE	W	1.00	<u>X</u>	-	_						
(8) Mona (Meyer	1 00	Х								
(9) Linda l	Hamilton	1 00	- ^ -		_						·
MNA			Χ				_				
(10) Denise	Specht	1 00	v								
		I	X								
ED MN	eide	1 00			- 1	' I			I	I	
ED MN	eide	1 00	Х								
ED MN (11) Eliot Se		1 00	Х					_			<u></u>

1 00

1 00

(13) Jamie Gulley SEIU

(14) Jane Nygaard AFGE

Part VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees,	an	d Hi	ghes	t C	ompensated En	ployees (contin	nued)	'	age (
				(C)					T /		
(A)	(B)	(do	not c		sition more	than o	one	(D)	(E)			
Name and title	Average	box,	unle	ss pe	erson	is both	n an	Reportable	(E) Reportable	l E	(F) stimate	ed
	hours per week (list any	offic	er an	dad L	irecto	or/trust	ee)	compensation	compensation	4	nount	of
	hours for	일	nst	1	ě	혈호	Former	from the	from related organizations		other pensa	tion
	related	le di	Ē	8	em	oy rest	ner	organization	(W-2/1099-MISC)	1	om the	
	organizations below dotted	학교	<u>a</u>		Key employee	8 8		(W-2/1099-MISC)	ĺ		anızatı	
	line)	Individual trustee or director	텵	Officer	ee	npe					d relati anizatio	
		ď	8	1		Highest compensated employee			•	ľ		
						ed						
(15) Matt Utecht	1 00											
UFCW		_X_	Щ									
(16) Wade Luneburg	1 00											
UNITE HERE		X							· · · · · · · · · · · · · · · · · · ·			
(17) Peggy Whitney	1 00											
APWU		X	ļ		Ш							
(18) Mary Broderick	1 00	١.,										
ED MN	4.00	Х										
(19) Bill McCarthy	1 00											
UNITE HERE	4.00	X	_	_			_					
(20) Alan Netland AFSCME	1 00	х										
(21) Bobby Kasper	1 00	^	-		H		\dashv					
LIUNA	1 00	х										
(22) Russell Hess	1 00			\neg								
LIUNA		x				İ		!				
(23) Mark Froemke	1 00											
BCTGM		х				l						
(24) Harry Melander	1 00											
UBC		Х]						
(25) Bill Moore	1 00	,				ļ						
AFSCME 1b Sub-total		X			!			231,443	0		25	052
1b Sub-total c Total from continuation sheets to Part VII, Se	oction A							231,443	0		- 33	953 <u>,</u> 0
d Total (add lines 1b and 1c)	olion A						•	231,443	0		35	,953
Total number of individuals (including but not lim	nited to those list	ted a	bove	e) w	ho r	eceiv	ed/					,000
reportable compensation from the organization												
										T	Yes	No
3 Did the organization list any former officer, direct	ctor, or trustee, k	ey e	mplo	oyee	e, or	high	est	compensated		, 100		.,
employee on line 1a? If "Yes," complete Schedu	ıle J for such ınd	lıvıdu	al							3		Х
4 For any individual listed on line 1a, is the sum o	f reportable com	pens	atio	n ar	nd o	ther o	com	pensation from		.		
the organization and related organizations great	ter than \$150,00	0? If	"Ye	s, " c	com	olete	Sct	nedule J for such].		
ındıvıdual										4		_X_
5 Did any person listed on line 1a receive or accru								ınızatıon or indivi	dual			
for services rendered to the organization? If "Ye	s," complete Sci	hedui	le J	for s	such	pers	son			5		X
Section B. Independent Contractors												
1 Complete this table for your five highest comper												
compensation from the organization Report cor	npensation for tr	ne ca	iend	ıar y	/ear	enaii	ng v	with or within the	organization's t	ах		
year (A)						Т		(B)	1	(C)		
Name and business addre	ess							Description of servi	ces Co	ompens	ation	
												0
None												0
												0
						_						0
Table and the second se		ا علالم		o I	4c -1	ah si	<u>م</u> ۱ .	ubo roc= →	1			0
Total number of independent contractors (include more than \$100,000 of compensation from the or	-	u tO l	08	C 11S	icu	ароv 0	⊂) ∨	ALIO TECEIAEG	ľ		1	`
more than \$ 100,000 or compensation from the o	· Marine Grider											

Part VIII Statement of Revenue
Check if Schedule O contain

		Check if Schedule O contain	ns a response	or note to any li	ne in this Part VIII			
		3 () () () () () () () () () ((A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, gra similar amounts not included ab	ints, and love	1a 1b 1c 1d 50,0 1e 145,0 1f 277,8	387 882 0	revenue		512-514
	 	Total Tide III To Ta Ti		Business Co	770,20	591		
Program Service Revenue	2a b			900099 900099 900099	-3,39 2,749,89	2,749,89	5	
Σ	d			900099	31,85 15,06			
S	e		000000	15,00	0	*		
gra	f	All other program service reveni	je			ő –		
5	l a	Total. Add lines 2a-2f			2,793,41			
	3	Investment income (including di other similar amounts) Income from investment of tax-e		•	▶ 4,27			4,274
	5	Royalties			•	o	-	
	6a b c	Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(ı) Real	(II) Personal	0	0		
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securities	0	0		,	
	c d	and sales expenses Gain or (loss) Net gain or (loss)		0	0 0	0		
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line See Part IV, line 18	•	a	0	, .		
Ĕ	b	Less direct expenses .		b	0			1.
	с 9а	Net income or (loss) from fundra Gross income from gaming activities See Part IV, line 19	ties	a	0)	ı	,
İ	b	Less direct expenses .		b	O			
	с 10а	Net income or (loss) from gaming Gross sales of inventory, less returns and allowances		a	0			
	b c	Less cost of goods sold Net income or (loss) from sales of	. 1	b	0	,	,	
ŀ	44	Miscellaneous Revenue		Business Code	⊣ '		,	, t 1
	11a							
	b				C			
	c d	All other revenue			11,233	11,233		
	е	Total. Add lines 11a–11d			11,233			
- 1	12	Total revenue. See instructions			▶ 3 282 103	2 804 650	ام ما	1 271

Form **990** (2014)

	Statement of Functional Expenses				
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all	columns All other of	organizations must	complete column (A)
	Check if Schedule O contains a response or note	to any line in this P	art IX		
Do 8b,	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			gonola, expenses	ing "ib,
	domestic governments See Part IV, line 21	0			13.
2	Grants and other assistance to domestic			1 3 3 4 3 20	
	individuals See Part IV, line 22	0			Resp. * .
3	Grants and other assistance to foreign			m 4 . Tr], 14	Specific Control
	organizations, foreign governments, and foreign			" light and "Hand	Antha Barrier
	individuals See Part IV, lines 15 and 16	0		,	,
4	Benefits paid to or for members	0		,	1
5	Compensation of current officers, directors,			ł	
_	trustees, and key employees	231,443			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	_	!	l	
_	persons described in section 4958(c)(3)(B)	0	<u> </u>		
7	Other salaries and wages	858,603		 	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	318,800			
9	Other employee benefits	339,173		 	
10	Payroll taxes	89,360			
11	Fees for services (non-employees)	0			
a	Management Legal	5,910			
b	Accounting	31,355		 	-
c d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0	1 3 1	, ,	
f	Investment management fees	0	and the state of t		
g	Other (If line 11g amount exceeds 10% of line 25, column	<u>~</u>	<u> </u>		
9	(A) amount, list line 11g expenses on Schedule O)	11,506			
12	Advertising and promotion	19,325			
13	Office expenses	154,800			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	109,323	-		
17	Travel	70,926			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	91,135			
20	Interest	57,515			
21	Payments to affiliates	643,580			
22	Depreciation, depletion, and amortization	79,872			0
23	Insurance	23,804	C	1	
24	Other expenses Itemize expenses not covered				i i i i i i i i i i i i i i i i i i i
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column	, e	1 10 11	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the s
	(A) amount, list line 24e expenses on Schedule O)		The same profits the same of t		
_	Register and vote	215,134	- turner		
a b		41,132			-
C	Legislative Fund - 2014 / 15 Donations and scholarships	24,544	·		
d	Labor - 2014 / 15	11,607			
e	All other expenses	33,742			
25	Total functional expenses. Add lines 1 through 24e	3,462,589	0	0	0
<u> 26</u>	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs			<u> </u>	
	from a combined educational campaign and				
	fundraising solicitation Check here ► if	ļ			
	following SOP 98-2 (ASC 958-720)				

Form 990 (2014), Minnesota AFL-CIO Part X Balance Sheet

		Check if Schedule O contains a response or	note to any line	in this Part X	, ,		
					(A)	Γ	(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing			10,042	1	455,312
	2	Savings and temporary cash investments			771,169	_	190,785
	3	Pledges and grants receivable, net			0		0
	4	Accounts receivable, net			0		0
	5	Loans and other receivables from current and for			st', '	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		trustees, key employees, and highest compensa-	ated employees		154 distant a salah di distanti dan simu		
	1	Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified perso			1 1 1 pt	1, 4	and the solution
		4958(f)(1)), persons described in section 4958(c)(3)(B), a			The fall of the second		The state of the s
40		sponsoring organizations of section 501(c)(9) voluntary en		ary	the state white the makes as the		514
e e		organizations (see instructions) Complete Part II of Sche	dule L			6	
Assets	7	Notes and loans receivable, net			0	<u> </u>	0
4	8	Inventories for sale or use				8	<u> </u>
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or				1	, ,
		other basis Complete Part VI of Schedule D	10a	1,553,241	and a second section of the second second section of the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section is a second section of the second section of the second section is a second section of the second section of the second section is a second section of the second section of the section	Mu amana ladis	tolk wager by to by a time to
	b	Less accumulated depreciation	10b	489,420	1,143,693		1,063,821
	11	Investments—publicly traded securities	44		76,926	11	76,926
	12	Investments—other securities See Part IV, line			0		0
	13	Investments—program-related See Part IV, line	: 11		0	-	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11	al line 24)		2.001.830	15 16	1,786,844
	16	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses	arime 34)		2,001,830 589	† 	-5,087
	17 18	Grants payable			309	18	-5,001
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability Complete F	Part IV of Sched	ule D		21	
ø	22	Loans and other payables to current and former				3 0 g	்து திரை மழித்தா ஆடித்த தி.தே.
Liabilities		trustees, key employees, highest compensated				Line Water	" "a, "" ,
þ		disqualified persons Complete Part II of Schedu				22	
3	23	Secured mortgages and notes payable to unrela		;	858,190	23	829,276
	24	Unsecured notes and loans payable to unrelated			0	24	0
	25	Other liabilities (including federal income tax, pa		d third			
		parties, and other liabilities not included on lines	17-24) Comple	ete			•
		Part X of Schedule D			0	25	0
	26	Total liabilities. Add lines 17 through 25			858,779	26	824,189
)	Organizations that follow SFAS 117 (ASC 958), check here	► X and			
Ses		complete lines 27 through 29, and lines 33 an	d 34.		for the state of t	. 512	remain a 4
an	27	Unrestricted net assets			1,143,051	27	962,655
Bal	28	Temporarily restricted net assets		l		28	
9	29	Permanently restricted net assets		ļ		29	
Ξ		Organizations that do not follow SFAS 117 (ASC958),	check here	► and	1 1 146 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	16. 14	
P		complete lines 30 through 34.			a dir	is Here	seems to these a course or again a colour man
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		ĺ		30	
88	31	Paid-in or capital surplus, or land, building, or eq				31	
at A	32	Retained earnings, endowment, accumulated in		unds		32	
ž	33	Total net assets or fund balances			1,143,051	33	962,655
	34	Total liabilities and net assets/fund balances			2,001,830	34	1,786,844

Form	990 (2014), Minnesota AFL-CIO	41	-0785271	Pa	ge 12
Par	t XI Reconciliation of Net Assets				<u>,, , , , , , , , , , , , , , , , , , ,</u>
	Check if Schedule O contains a response or note to any line in this Part XI		•		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,282	2,193
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,462	2,589
3	Revenue less expenses Subtract line 2 from line 1	3		-180	0,396
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,143	3,051
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		962	2,6 <u>55</u>
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				X.
			<u></u>	Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_ %		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O		,		1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both		1	,	1
	X Separate basis Consolidated basis Both consolidated and separate basis			_	
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	:			1
С	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	×	Ì
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O			•	}
2-	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			٠	
3a	the Single Audit Act and OMB Circular A-133?		3a		X
L	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				<u> </u>
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
	required addit of about, explain my in concesse of and extension and		Form	990	(2014)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of organization

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990.

Open to Public Inspection

Employer identification number

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

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

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Min	nesota AFL-CIO			_	41-0785271	
Pa	ort I-A Complete if	the organization is exempt und	der section 501	(c) or is a section 527	organization.	
1		the organization's direct and indirect p				
2	Political expenditures			▶ \$		226,741
3	Volunteer hours					600
Pa	rt I-B Complete if	the organization is exempt uno	ter section 501	(c)(3)		
1		excise tax incurred by the organization				
2	•	excise tax incurred by organization m		ction 4955 > \$		
3	•	red a section 4955 tax, did it file Form	-	_	Yes	No
4a			,		Yes	□No
b	If "Yes," describe in Part	IV				
		the organization is exempt und	der section 501	(c), except section 501	(c)(3).	
1	Enter the amount directly	y expended by the filing organization	for section 527 exe	empt function		
	activities			▶ \$		21,341
2		filing organization's funds contributed	to other organizat	ions		
	for section 527 exempt f			. ▶\$		205,400
3	•	penditures Add lines 1 and 2 Enter h	nere and on Form	1120-POL,		
	line 17b			▶ \$		226,741
4	• •	n file Form 1120-POL for this year?	- (EIN) 6 H	507 11 1	Yes	X No
5		sses and employer identification numb nents For each organization listed, en				
		ontributions received that were prompt				
		d fund or a political action committee				
_	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of	political
	(a) Name	(b) Nucleo	(0) 2	filing organization's	contributions red	eived and
				funds If none, enter -0-	promptly and delivered to a	
					political organi none, ente	
		<u> </u>				
(1)	Norking America	4407 East Lake Street			}	400 700
		Minneapolis, MN 55406		27,012	 	199,729
(2)		}				
(3)						
(4)						
·*/						
(5)		ļ				
		 				
(6)			!			

f Grassroots lobbying expenditures

Sch	ledule C (Form 990 or 990-EZ) 2014					Dans 2
Ρ	art II-A Complete if the organization	is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	Page 2
	under section 501(h)).	•	1	- 1(-)(-) and mo	a i oiiii oi oo (cid	
 A	Check ▶ if the filing organization be	longs to an	affiliated group (a	ind list in Part IV	each affiliated are	un momborle
	name, address, EIN, exper	ises and s	hare of excess lol	hhuina evnenditui	reci	rup member s
В	Check ▶ if the filing organization che	ecked box A	and "limited con	trol" provisions ar	nes) nnlv	
	Limits on Lobby			p. 07.0.07.0 ap	i i	<u> </u>
	(The term "expenditures" me	ans amount	nures s_paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence publi	c opinion (gr	ass roots lobbying)			0
b	Total lobbying expenditures to influence a leg	islative body	(direct lobbying)			0
C	Total lobbying expenditures (add lines 1a and	1 1b)			0	0
d	Other exempt purpose expenditures					0
е	Total exempt purpose expenditures (add lines	s 1c and 1d)			0	0
f	Lobbying nontaxable amount Enter the amount	unt from the f	following table in bot	h		
	columns				0	0
- 1	If the amount on line 1e, column (a) or (b) is:	The lobbyi	ng nontaxable amou	unt is:	P. 19	Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Sa
	Not over \$500,000		amount on line 1e		\$ 10 \$	
	Over \$500,000 but not over \$1,000,000		lus 15% of the excess		1 M 3 26 m 1 1 1 1 1 1 1	1 * , '
}	Over \$1,000,000 but not over \$1,500,000		lus 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 p	lus 5% of the excess of	over \$1,500,000		
ᆜ	Over \$17,000,000 Grassroots nontaxable amount (enter 25% of				0	0
g	Subtract line 1g from line 1a If zero or less, e	-			0	0
h :	Subtract line 1f from line 1c if zero or less, e				0	0
:	If there is an amount other than zero on either		ne 1) did the organi	zation file Form 472		L
3	section 4911 tax for this year?		no n, ala me organi	Edilon inc 1 onn 412	o reporting	Yes No
_		ar Avoragin	g Period Under sec	otion 501/h)		
	(Some organizations that made a se	_	-		of the five columns	helow
	, •		structions for lines		J1 1110 1140 0014111113	. DC:011.
	oco tric	ocparate iii		za amougn zm,		
	Lobbying	Expenditu	res During 4-Year A	veraging Period		
	• • •	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount		0	0	0	0
	Lobbying ceiling amount (150% of line 2a, column(e))	11/11			the many the second of the sec	
b	(150% of line 2a, column(e))	og St. 'n	ta the Person	High and the second	1,	0
С	Total lobbying expenditures		0	0	0	0
d	Grassroots nontaxable amount		0	0	0	0
_	Grassroots ceiling amount (150% of line 2d, column (e))	प्रमुख र इ. इ. इ. इ. इ. इ. इ. इ. इ. इ. इ. इ. इ. इ	1 14 14 14 14 14 14 14 14 14 14 14 14 14	ig and	, , , , , , , , , , , , , , , , , , ,	0

Schedule C (Form 990 or 990-EZ) 2014

Schèdule C (Form 990 or 990-EZ) 2014

Pai	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	For	Page 3 m 5768
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(b)
of th	e lobbying activity	Yes	No	Amount
1 a	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 Volunteers?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ing p	The state of the s
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			And Andrews (Andrews
d e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i	1 u tot		0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			The stage of the stage of
þ	If "Yes," enter the amount of any tax incurred under section 4912	유민		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	ance of	,, ,,,	!
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			,
Par	Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	c)(5),	or s	ection
	JU1(C)(U).			Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X
Par	Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of			
	political expenses for which the section 527(f) tax was paid).		Tage of the	
а	Current year	Į	2a	
b	Carryover from last year	Į	2b	
C	Total	Į	2c	0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	Ĺ	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	4	17 (6)	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible		81007	
_	lobbying and political expenditure next year?	}	4	
5_	Taxable amount of lobbying and political expenditures (see instructions)		5	0
Part -				A lines d and
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	iist), P	art II-/	A, lines I and
	e instructions), and Part II-B, line 1 Also, complete this part for any additional information -A Line 2 - \$11,607 towards the Labor 2014/15 project. Also, \$215,134 towards the 2014/15			
Parti	-A Line 2 - \$11,007 towards the Labor 2014/10 project Also, \$210,104 towards the 2014/10			
regist	er and vote campaign of which \$205,400 went to "Working America" NOTE Other political			
activit	y is reported on a separate Form 990 filed for the "Political Fund" (EIN # 91-2101127)			

SCHEDULE D (Form 990)

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

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name	of the organization		Employer identification number
	esota AFL-CIO		41-0785271
Pai	Organizations Maintaining Don	or Advised Funds or Other Similar Fun	ds or Accounts.
_	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 6	
	·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do	nor advisors in writing that the assets held in de	onor advised
	funds are the organization's property, subjec-	to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, don	ors, and donor advisors in writing that grant fund	ds can be
		the benefit of the donor or donor advisor, or for	r any other
	purpose conferring impermissible private ber	nefit?	Yes No
Par	t II Conservation Easements.		
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held	by the organization (check all that apply)	
	Preservation of land for public use (e.g., reci	eation or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space	<u>—</u>	
2		tion held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easi		2b
C	Number of conservation easements on a cer	· ·	2c
d	Number of conservation easements included	• • •	
_	historic structure listed in the National Regist		_2d
3		, transferred, released, extinguished, or termina	ated by the organization
4	during the tax year Number of states where property subject to c	onservation easement is located	
4 5		egarding the periodic monitoring, inspection, ha	ending of
•	violations, and enforcement of the conservati		Yes No
6		ng, inspecting, and enforcing conservation easi	ements during the year
	>		
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation easemer	nts during the year
	▶ \$		
8		on line 2(d) above satisfy the requirements of se	ection
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		∐ Yes ∐ No
9		ports conservation easements in its revenue and	
	the organization's accounting for conservation	text of the footnote to the organization's financia	ai statements that describes
Par		ections of Art, Historical Treasures, or 0	Other Similar Assets
ŗ ai		ered "Yes" to Form 990, Part IV, line 8	5(1101 O111111111 7100010)
		r SFAS 116 (ASC 958), not to report in its rever	nue statement and balance sheet
1a		ilar assets held for public exhibition, education,	
		of the footnote to its financial statements that of	
b		r SFAS 116 (ASC 958), to report in its revenue	
~		ilar assets held for public exhibition, education,	
	of public service, provide the following amour	· · · · · · · · · · · · · · · · · · ·	
	(i) Revenue included in Form 990, Part VIII, I		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2		rt, historical treasures, or other similar assets for	
	•	der SFAS 116 (ASC 958) relating to these items	
а	Revenue included in Form 990, Part VIII, line	1	\$
h	Assets included in Form 990, Part X		▶ \$

Par	t III Organizations Maintaining C	Collegations of A. 4. 111				41-07852	271	Page 2
3		ollections of Art, His	storical T	reasures, c	or Other Si	<u>milar Asset</u>	s (continu	ued)
3	Using the organization's acquisition, acceuse of its collection items (check all that a	ession, and other records	, check any	of the follow	ving that are	a significant		
_	Public exhibition	. F	- .					
а		d [Loan	or exchange	programs			
b	Scholarly research	e	Other					
С	Preservation for future generations	· 						
4	Provide a description of the organization's		how they fo	irther the ere	ionization's s			
	Part XIII	o concentents and explain	now they it	ການາອາ ພາອ ດາຍູ	janization's e	xempt purpos	e in	
5	During the year, did the organization solid	nt or receive donations o	Fort biotori	001 tropo				
•	assets to be sold to raise funds rather tha	in to be maintained as no	ert of the or	cai ireasures	o, or other sin	nılar	г , г	¬
Par				gariizations	Conection		Yes _	No
Par								
	Complete if the organization ar	iswered "Yes" to Forn	n 990, Pai	rt IV, line 9,	or reported	l an amount	on Form	
	990, Part X, line 21							
1a	Is the organization an agent, trustee, cust	odian or other intermedia	ary for cont	ributions or c	ther assets r	ot		
	included on Form 990, Part X?						Yes [No
b	If "Yes," explain the arrangement in Part >	(III and complete the foll-	owing table			_		
						Ar	nount	
С	Beginning balance				1c			0
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			0
2a	Did the organization include an amount of	n Form 990, Part X, line	21, for escr	ow or custod	lial account li	ability?	Yes	X No
b	If "Yes," explain the arrangement in Part >					•		₹ ```
		thi Oncok here if the exp		as been prov	dea iii i ait z	<u> </u>		
Pari			- 000 D-					
	Complete if the organization ar							
	<u> </u>		rior year	(c) Two years		ree years back	(e) Four ye	
1a	Beginning of year balance	0	0		0	0	ļ.———	0
þ	Contributions							
C	Net investment earnings, gains,							
	and losses							
ď	Grants or scholarships							
е	Other expenditures for facilities				j			
	and programs							
f	Administrative expenses						ļ 	
g	End of year balance	0	0		0	0	L	0
2	Provide the estimated percentage of the c	current year end balance	(line 1g, co	lumn (a)) he	ld as			
а	Board designated or quasi-endowment	▶ %						
b	Permanent endowment	%						
С	Temporarily restricted endowment	<u>%</u>						
	The percentages in lines 2a, 2b, and 2c sl	hould equal 100%						
За	Are there endowment funds not in the pos	session of the organizat	on that are	held and ad	ministered fo	r the		
	organization by					,	Yes	s No
	(i) unrelated organizations					ļ	3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organizati	ons listed as required on	Schedule I	R?		Į	3b	
4	Describe in Part XIII the intended uses of	the organization's endow	ment funds	s				
Part	VI Land, Buildings, and Equipm	ent.						
	Complete if the organization an	swered "Yes" to Form	1 990, Par	t IV, line 11	a See Form	n 990, Part I	X, line 10	
	Description of property	(a) Cost or other basis	1	st or other	(c) Accum	1	(d) Book va	alue
	· · · · · ·	(investment)	basis	s (other)	deprecia	ation		
1a	Land			0	. , ,	``		0
b	Buildings			1,394,431		371,531	1,0	022,900
C	Leasehold improvements			0	-	0		0
d	Equipment		+	97,693		95,820		1,873
e	Other	C	+	61,117		22,069		39,048
	. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part X	, column (E			>	1,0	063,821
								222 224

Schedule D (Form 990) 2014 Minnesota AFL-CIO

41-0785271

Part VII	Investments—Other Secu	urities. In answered "Yes" to Form 99	On Part IV line 11h See Form	m 000 Post V Iva 42
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	aluation
(1) Financial o	derivatives	0	 	THURSE VALUE
(2) Closely-he	ld equity interests		 	
	. ,			
(4)				
<u>(B)</u>				
(C)				
(E)				
(F)				
(G)	••••			
Total (Column (b) m	nust equal Form 990, Part X, col. (B) line 12.)	•		, , , , , , , , , , , , , , , , , , ,
Part VIII	Investments—Program R		<u> </u>	
rait VIII		n answered "Yes" to Form 99	In Part IV line 11c Sec Form	n 000 Part V June 12
		i		
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Column (b) m	nust equal Form 990, Part X, col (B) line 13)	▶ 0	<u> </u>	
Part IX	Other Assets. Complete if the organization	n answered <u>"Yes"</u> to Form 99	0 Part IV line 11d See Form	n 990 Part X line 15
	Complete is the organization	(a) Description	0,1 a,114, mile 11a 000 1 oil	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part >	(, col (B) line 15)	>	
Part X	Other Liabilities.			E 000 B 1 V
	Complete if the organization line 25	n answered "Yes" to Form 99	0, Part IV, line 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal in	ncome taxes	0		>
_(2)				* * * * * * * * * * * * * * * * * * * *
_(3)			11 11 11 11 11 11 11 11 11 11 11 11 11	e de la companya de l
			The state of the s	Sand Lead All States
(5)			A Section of the sect	man and the second of the seco
(6)				F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			, ne	1 1 1
			10 m	,
(9)		>		
	st equal Form 990, Part X, cot (B) line 25) ncertain tax positions In Part XIII, pr		organization's financial statements	that reports the
 ∠. Liability for ur 	icertain tax positions in Part Alli, pr	ONING THE TEXT OF THE TOOLHOLG TO THE	organization s illiancial statements	macreports the

_	dule D (Form 990) 2014 Minnesota AFL-CIO	41-07852	271 Page 4
Par	Reconciliation of Revenue per Audited Financial Statements With Reven	ue per Return.	
1	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1	3,741,019
a	Not compared and a first than the second sec		
b	Donated services and use of facilities 2a 2b		
c	Recoveries of prior year grants 2c		
d	015-24/19 22 1 1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1	150 026	
e	Add lines 2a through 2d	158,826	450.000
3	Subtract line 2e from line 1	2e 3	458,826
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-3	3,282,193
а	Investment expenses not included on Form 990, Part VIII, line 7b	1	
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,282,193
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Exper	ses per Retur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	, , , , , , , , , , , , , , , , , , ,	
1	Total expenses and losses per audited financial statements	1	3,921,415
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1,400 4	
а	Donated services and use of facilities 2a	4,	
b	Prior year adjustments 2b		
C	Other losses 2c	"	
d		58,826	
е	Add lines 2a through 2d	_2e	458,826
3	Subtract line 2e from line 1	3	3,462,589
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	" 100	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)		
_ C	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	3,462,589
	t XIII Supplemental Information.	05 Dani V II.a. 4	Deat V. Lea
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and irt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional		Part X, line
•			
Part)	XI Line 2d - Political expenses reported on a separate form 990 of the section 527		
	(01.2101127.)		
	(91-2101127)		
Part)	XII Line 2d - Political expenses reported on a separate form 990 of the section 527		
PAC ((91-2101127)		
	·		
 .			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

Minnesota AFL-CIO	41-0785271
Form 990, Part VI, Section A, Line 6 - Affiliated Organizations send member delegates to the	
Bi-annual convention based on per capita payments made by them. Delegates vote on	
constitutional items and elect a President and a Secretary / Treasurer to administer the	
ongoing operations. A General Board made up of representatives from the affiliated	
Organizations acts as the oversight governing body between conventions	
Form 990, Part VI, Section B, Line 11a - The form 990 is prepared by the external independent	••••
auditor and is then reviewed by the elected Secretary / Treasurer prior to being submitted to	
the IRS	
Form 990, Part VI, Section B, Line 15a - The salaries of the President and Secretary /	
Treasurer are determined at the convention held bi-annually	
Form 990, Part VI, Section B, Line 19 - Governing documents, policies, and financial	
statements would be made available upon authorized formal request	
Form 990, Part XII, Line 2c - The audited financial statements this year were presented to	
the full General Board by the independent CPA auditor	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Minnesota AFL-CIO

Part 1

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

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

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

Employer identification number 41-0785271

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity		(c) Legal domicile (state To foreage country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling
(1)		5	(famo)			Amio
(2)						
(3)						
(4)						
(5)						
(9)						
Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year	ations Complete if the	e organization an	swered "Yes" on	Form 990, Part	IV, line 34 beca	luse it had
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling enity	(g) Section 512(b)(13) controlled
						Yes No
(1) MN AFL-CIO Political Fund 91-2101127 175 Aurora Avenue St Paul, MN 55103	Political fund	NN	527			
41-1818507	Title Holding Company	NN	501(c)(2)			×
(3)						
(4)						
(6)						
(9)						
(1)						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schedule R	Schedule R (Form 990) 2014

41-0785271	
<u>0</u>	
ota AFL-C	
Minnes	
990) 2014	

Schedule R (Form

Part III

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34

Page 2

(r) Section 512(b)(13) confrolled Percentage ownership Ŷ 3 Yes Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. ŝ General or managing partner? 3 (h) Percentage ownership Yes (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) end-of-year assets (g) Share of (h)
Disproportionate
allocations? Yes No (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year. (f) Share of total income (d)
Direct controlling
entity excluded from tax under sections 512-514) (e)
Predominant
income (related,
unrelated, (c)
Legal domicile
(state or foreign country) (d)
(Direct controlling | entity (b) Primary activity (c)
Legal
domicile
(state or
foreign Primary activity (a) (ame, address, and EIN of related organization Name, address, and EIN of related organization Part IV 3 9 8 Ξ Ξ 3 <u></u> 4 2 <u>ල</u> 3 3 9 Ξ

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41-0785271 Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Com	Note . Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	ŝ
1 Durir	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	zations listed in	Parts II-IV?			
a Rece	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	•		1a		×
b Gift,	Gift, grant, or capital contribution to related organization(s)			16		×
c Gift,	Gift, grant, or capital contribution from related organization(s)			10		×
d Loan	Loans or loan guarantees to or for related organization(s)			1d		×
e Loan	Loans or loan guarantees by related organization(s).	•	•	16		×
				3.1		ŀ
f Divic	Dividends from related organization(s)			#	1 1	×
g Sale	Sale of assets to related organization(s)			19		×
	Purchase of assets from related organization(s)			ŧ		×
i Exch	Exchange of assets with related organization(s).			=		×
j Leas	Lease of facilities, equipment, or other assets to related organization(s)			1,		×
k Leas	Lease of facilities, equipment, or other assets from related organization(s)			, 1k	· ×	;
I Perf	Performance of services or membership or fundraising solicitations for related organization(s).			=		×
m Perf	Performance of services or membership or fundraising solicitations by related organization(s).			٤		×
n Shar	Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)			1	×	
o Shar	Sharing of paid employees with related organization(s).			9	×	
				,	1	
	Reimbursement paid to related organization(s) for expenses	•		1p		×
q Rein	Reimbursement paid by related organization(s) for expenses.	•		19		×
					,	;
. Othe	Other transfer of cash or property to related organization(s).		•	7		×
S	Other transfer of cash or property from related organization(s)			15		×
2 If the	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ing covered rela	tionships and transactic	n thresh	olds	
	(a) Name of related ormanization	(b) Transaction	(c) Amount inclosed	Method	(d)	000
		type (a-s)		amount involved	t involv	, , ,
(1) NONE						
(2)						
(3)						
(4)						
(5)						
(9)						
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Unrelated Organizations Taxable as a Partnership Complete If the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

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

Grade of Direction Country Cou
Ves No No No No No No No No No No No No No

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Part VII	Supplen	nental Information		
	Provide a	additional information for responses to questions on Schedule	R (see instructions)	
				
				
				
				