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SCANNED OCT 0 4 2016

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.

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

Open to Public Inspection

OMB No 1545-0047

_	r Ot III		ending_C	CI 31, 2013	
В	Check if applicab	C Name of organization		D Employer identific	cation number
_					
┕	Addre	e THE MIDWAY MEN S CLUB]	
L	Name	Doing business as		41-1	842630
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final return	710 DAVMOND ASSENTED		651-	647-1997
	termu	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	280,052.
	Amen	ded CATAM DATT AND EE114		H(a) Is this a group re	
F	Apple			for subordinates	
L	pend			H(b) Are all subordinates in	
_	Tay av	4 . 4	or 527	1 ''	list (see instructions)
_			01 321		
		te: N/A	1	H(c) Group exemptio	
_		forganization: X Corporation Trust Association Other	L Year	of formation: 1941 N	State of legal domicile: MN
P	art I	Summary			
ģ	1	Briefly describe the organization's mission or most significant activities: TO P.			LTURAL, AND
ä		ATHLETIC ACTIVITIES IN THE MIDWAY AREA O	F ST.	PAUL, MINNE	SOTA. THE
Ĕ	2	Check this box if the organization discontinued its operations or dispositions.	sed of more	e than 25% of its net as	ssets
Governance	3	Number of voting members of the governing body (Part VI, line 1a)		3	12
		Number of independent voting members of the governing body (Part VI, line 1b)		4	12
SS &	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
Activities &	6	Total number of volunteers (estimate if necessary)		6	320
ŧ	7 2	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖	l h	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
	+-	That difficulties beginness taxable intestine well in other configuration of the configuratio	·	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		2,000.	2,000.
ĕ	"		· -	248,454.	278,052.
Revenue	9	Program service revenue (Part VIII, line 2g)	-		
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	.	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		250,454.	280,052.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	63,200.	60,500.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
Š	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,340.	8,220.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
9	L b	Total fundraising expenses (Part IX, column (D), line 25)	_0.		
ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		162,413.	173,238.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A); line-25)		230,953.	241,958.
	19	Revenue less expenses Subtract line 18 from line 12		19,501.	38,094.
56		The contract costs of the costs	Re	eginning of Current Year	End of Year
Assets or	20	Total assets (Part X, line 16)	P	182,574.	220,668.
ASS Del			-	0.	0.
Net/	21	Total liabilities (Part X, line 26)	· -	182,574.	220,668.
		Net assets or fund balances Subtract line 21 from line 20 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		104,574.	220,000.
	art II				· · · · · · · · · · · · · · · · · · ·
		alties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is
tru	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	nich prepare	r has any knowledge.	
		/ (what Muerian			15/2016
Sig	gn	Signature of officer		Date	,
He	ere	Richard Grieman President			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Рa	id	WYLIE R. KLAWITTER Wuliekklaurth	to 1	9 15 16 self-employ	ed P01816942
Pre	eparer	Firm's name BWK ROGERS PC		Firm's EIN	27-1375413
	e Only	Firm's address 431 SOUTH 7TH STREET, SUITE 242	4		
		MINNEAPOLIS, MN 55415	_	Phone no 61	2-332-5446
N.4.	av the	·			X Yes No
IVI	29 111 0	RS discuss this return with the preparer shown above? (see instructions)			Tes LINO

	990 (2014) THE MIDWAY MEN'S CLUB	41-1842630	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission: TO PROMOTE SOCIAL, CULTURAL, AND ATHLETIC ACTIVITIES IT AREA OF ST. PAUL, MINNESOTA. THE PRESCRIBED NEIGHBORHOOF "MIDWAY" BETWEEN DOWNTOWN ST. PAUL AND DOWNTOWN MINNEA	OD IS LOCATED	
	LARGE URBAN AREA.	FOUTS AND IS	<u> </u>
	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	·	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services if "Yes," describe these changes on Schedule O	;?	X No
4	Describe the organization's program service accomplishments for each of its three largest program services,		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$		052.)
	THE MIDWAY MEN'S CLUB PURPOSE IS TO PROMOTE SOCIAL, CU	LTURAL, AND	
	ATHLETIC ACTIVITIES IN THE MIDWAY AREA OF ST. PAUL, MI	NNESOTA. THE	
	PRESCRIBED NEIGHBORHOOD IS LOCATED "MIDWAY" BETWEEN DO	WNTOWN ST. PA	UL
	AND DOWNTOWN MINNEAPOLIS AND IS A LARGE URBAN AREA. TH	E CLUB OPERAT	ES_A
	STAND AT THE MINNESOTA STATE FAIR, WHICH RUNS 12 DAYS	EACH SUMMER	
	THROUGH LABOR DAY. THE STAND IS RUN BY UNPAID VOLUNTEE	RS AND SELLS	
		URSTS, HOT	
	ITALIAN PORK SANDWICHES, AND SOFT DRINKS. AFTER EXPENS		NG
	THE STAND ARE PAID, ALL PROCEEDS ARE DISTRIBUTED THROU		
	NEIGHBORHOOD YOUTH GROUPS, MAINLY FOR SPORTS EQUIPMENT		10
		, BFORIB	
	ACTIVITIES, AND OTHER YOUTH ACTIVITIES.		
	00.500		
4b	· · ·	renue \$)
		PROGRESS OF T	<u>HE</u>
	DISTRIBUTIONS AND ARE THE FORUM THROUGH WHICH VARIOUS		
	APPLY FOR FUNDS. IN ADDITION, TWO SOCIAL GATHERINGS AR		<u>또</u>
	MEMBERS EVERY YEAR, AS THANKS FOR THEIR WORK AT THE ST	ATE FAIR.	
4c	(Code) (Expenses \$	venue \$	<u> </u>
	/ /Lxporross /		
		 	
			
			
			
			
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 236,299.		
43200	12	Form 9	90 (2014)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		_X_
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 I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.]		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	_		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	ļ,		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		
	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		X
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		<u> X</u>
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<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? 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		_X_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	<u> </u>
		Form	990	(2014)

Form 990 (2014) THE MIDWAY MEN'S C
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	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	ľ		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	ĺ		
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	İ		
	Schedule K. If "No", go to line 25a	24a		_X_
	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	١		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05.		v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
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	054		x
00	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 "Yes,"	1		
	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	20		
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	<u> </u>		
	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	28a		_x_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ļ		!
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
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		X
35a		35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			ŀ
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 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	l		
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X OOA	L(2014)
		rorm	9 3 U	(ZU14)

Pa	rt 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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ
	(gambling) winnings to prize winners?	1c		l
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0		·	ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		х
	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		X
b	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 (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		l
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		L
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			ĺ
а	Initiation fees and capital contributions included on Part VIII, line 12 . 10a	[
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ľ
11	Section 501(c)(12) organizations. Enter:			l
а	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources against		i i	
	amounts due or received from them.)			l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ <u>.</u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			l
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			——
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			İ
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans . 13b			!
	Enter the amount of reserves on hand			<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	}	J

Part VI Governance, Management, and Disclosure For each "ves" response to lines 2 through 75 below, and for a "Wo" response to line 8 a, 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. Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the governing body delegated broad suthority to an executive committee or smilar committee, explain in Schedule 0. b Enter the number of voting members included in line 1a, above, who are independent 1 2 b In the committee, explain in Schedule 0. c Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, directors, or trustees, or key employees to a management company or other person? 2 Did the organization have members as or stockholders? 5 Did the organization have members as or stockholders? 6 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? 7 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? 8 A raw any governance discissions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 A raw any governance discissions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 B A raw any governance discissions of the process of th		990 (2014) THE MIDWAY MEN'S CLUB		11 101	630		age 6
To like 88, 86, or 10b below, discribe the circumstances, processes, or changes in Schedule O. See instructions Check Eschedule O. Colonians a regiones or note to any line in this Part VI Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the operange body of these diversals of the diversal of the governing body or if the overning body of the organization of the diversals of the governing body or of the colonians of the governing body of the organization of the governing body or the organization of the governing body of the organization of the governing body or the process of the governing body or the process of the governing body or the process of the governing body or the process of the governing body or the process of the governing body or the process of the governing body or the process of the governing body or officers, directors, or fursitess, or key employees to a management company or other person? 2 bod the organization of the governing body or the governing body or the governing body or the governing body or the governing body or the governing body or the governing body? 3 bod the organization have members or stockholders? 5 bod by the organization have members of the governing body? 5 bod by the organization have members of the governing body? 7 bod by the organization that the governing body? 8 bod the organization that provides, or other persons who had the power to elect or appoint one or more members of the governing body? 7 bod by the organization that the governing body? 8 bod by the organization that the governing body? 9 bod by the organization that the governing body? 10 bod the organization that the governing body? 11 body the organization that the governing body? 12 bod the organization that the governing body? 13 bod the organization that the governing body? 14 bod the organization have within the meeting							
Check if Schedulo O contains a response or note to any line in this Part VI Section A. Governing Body and Management 12 13 14 15 15 15 16 16 17 16 17 18 18 18 18 18 19 19 19 19 19	Гаі				NO F	espon	se
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THE ORGANIZATION - 651-647-1997 710 RAYMOND AVENUE, SAINT PAUL,

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees, and former such persons.

	(A) Name and Title	(B) Average hours per	,,,		(C Pos		,		(D)	(E)	(F)
	Name and Thie	_	_ـر ا						Donortobio	Reportable	Estimated
			l lao	not c	heck	more	than is bot	one h an	Reportable compensation	compensation	amount of
		week	offic	er an	d a d	irecto	or/trus	tee)	from	from related	other
		(list any	Ę						the	organizations	compensation
		hours for	불	_			ted		organization	(W-2/1099-MISC)	from the
		related	stee	ruste		۱.,	eusa		(W-2/1099-MISC)		organization
		organizations	al fr	onai t		ploye	E 69				and related
		below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer			organizations
(1) JEROME	PETCHEL	2.00	트	트	5	ž	로 등	22			
CHAIRMAN	PETCHEL	2.00	x		X	ļ			0.	0.	0.
	D GRIEMAN	2.00	-		23						
PRESIDENT	D GRIEMAN	2.00	x		x		ļ		0.	0.	0.
	MELENDEZ	2.00					\vdash				
VICE PRESIDE			x		x				0.	0.	0.
(4) MATTHEW		2.00		_			 				
MEMEBERSHIP			x		x		1		0.	0.	0.
	IA FRANKENFIELD	2.00					Г				
TREASURER			x		X				0.	0.	0.
(6) THOMAS	THOMAS	2.00									
RECORDING SE	ECRETARY		X		X		<u> </u>		0.	0.	0.
(7) ELIZABI	ETH GORMAN	1.00									
DIRECTOR			X			Ĺ_	<u> </u>		0.	0.	0.
(8) JAMES I	HAGG	1.00									
DIRECTOR			X		<u> </u>	Ĺ			0.	0.	0.
(9) RICK ST	r. Martin	1.00			ĺ						
DIRECTOR			X						0.	0.	0.
(10) WILLIAM	M NORTON	1.00			1	1					
DIRECTOR			X	_	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(11) JOAN GO	ORMAN	1.00									
DIRECTOR		1 00	X						0.	0.	0.
(12) WILLIAM	M WALD	1.00								_	
DIRECTOR		2 00	X		ļ	<u> </u>	<u> </u>		0.	0.	0.
(13) MIKE W		3.00									
	SINESS MANAGER	2 00	X				-		0.	0.	0.
(14) STEVE (3.00	,,								4 110
	MANAGER/DIRECTO	2 00	X				-		0.	0.	4,110.
(15) RICH PI		3.00	1,7								4 110
FAIR STAND I	MANAGER/DIRECTO		Х	-		-	\vdash		0.	0.	4,110.
			1								
		L		L_		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	5 990 (0014)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form	990	(2014). THE I	MIDWAY ME	EN'S CLUB	<u>-</u>		41-1842	630 Page 9
Pa	rt VI	II Statement of Reve	nue					
	`	Check if Schedule O con	tains a response	or note to any lin		(D)	(0)	. (5)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ıts ıts	1 a	Federated campaigns	. 1a					1 9,12
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b	2,000.				
Am Am	С	Fundraising events .	. 1c					
a git	d	Related organizations	1d					
Si.ii	е	Government grants (contribu	tions) 1e					
er S	f	All other contributions, gifts, gran	nts, and					
혈취		sımılar amounts not ıncluded abo	ove . 1f					
on to	g	Noncash contributions included in line	s 1a-1f \$					
<u>5</u> 6	h	Total. Add lines 1a-1f		•	2,000.			
				Business Code				
Program Service Revenue	2 a	STATE FAIR REVI	ENUE	722210	278,052.	278,052.		
er v	b		· · ·					ļ · · · <u></u>
m S	С						-	
Re	d							
ğ	е							
-		All other program service reve	enue .		270 052			
	9				278,052.			
	3	Investment income (including	j alviaenas, inter					
	4	other similar amounts) Income from investment of ta	v avamet band	P				
	5	Royalties	ix-exempt bond ;	Dioceeds				-
	3	Hoyanies	(ı) Real	(II) Personal				1
	6 a	Gross rents	(I) Heal	(ii) Fersonai				
	b			 				
	c	-						
		Net rental income or (loss)	L	<u> </u>				
		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	(7)					
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)		•				
o l	8 a	Gross income from fundraisir	ng events (not					
Other Revenue		including \$	of			-		
ě		contributions reported on line	e 1c) See					
P.		Part IV, line 18	а					
돩		Less: direct expenses	b					
		Net income or (loss) from fun-	_	>				
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	а					
		Less. direct expenses	b	L				
		Net income or (loss) from gan	-	P				
	10 a	Gross sales of inventory, less						
	L	and allowances	. a					
		Less: cost of goods sold	. b					
}	<u>C</u>	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
ŀ	11 a			business Code				
	ı, a							
	C							
	d							-
		Total. Add lines 11a-11d	• • •	•				
	12	Total revenue. See instructions.	• •		280,052.	278,052.	0.	0.
43200 11-07-								Form 990 (2014)

<u>Secti</u>	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in (A)		(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			Į	
	and domestic governments. See Part IV, line 21	60,500.	60,500.		
2	Grants and other assistance to domestic			İ	
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	8,220.	8,220.		
6	Compensation not included above, to disqualified	İ			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	-			
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes .				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
С.	Accounting .				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25)				
g	Other. (If line 11g amount exceeds 10% of line 25,				
40	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion			· · · · · · · · · · · · · · · · · · ·	
13	Office expenses Information technology				
14	Royalties				
15 16	Occupancy				
16 17	Travel				
	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,184.	5,184.		
20	Interest	3,1011	3,1011		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,000.	5,000.		
23	Insurance			**	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		·		
а	STATE FAIR EXPENSES	139,040.	139,040.		
b	SOCIAL EVENT	18,355.	18,355.		
c					
d					
е	All other expenses	5,659.		5,659.	
25	Total functional expenses. Add lines 1 through 24e	241,958.	236,299.	5,659.	0.
26	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 if following SOP 98-2 (ASC 958-720)				5 000 (204.4)

Par	tΧ	Balance Sheet			
	•	Check if Schedule O contains a response or note to any line in this Part X	••		
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	167,574.	1	210,668.
	2	Savings and temporary cash investments		2	<u></u>
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ĕ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other		į	
		basis Complete Part VI of Schedule D . 10a 20,000.			
	b	Less: accumulated depreciation 10b 10,000.	15,000.	10c	10,000.
	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)	182,574.	16	220,668.
	17	Accounts payable and accrued expenses		17	<u> </u>
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities .		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Ě		key employees, highest compensated employees, and disqualified persons			
Liabilities	ļ	Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	-		-
es		complete lines 27 through 29, and lines 33 and 34.	400 554		000 660
anc	27	Unrestricted net assets	182,574.	27	220,668.
Bali	28	Temporanly restricted net assets		28	
臣	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds	.	30	
Ass	31	Paid·in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds	100:	32	000 555
Z	33	Total net assets or fund balances	182,574.	33	220,668.
	34	Total liabilities and net assets/fund balances	<u> 182,574.</u>	34	220,668.

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.

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

OMB No 1545-0047

Employer identification number Name of the organization THE MIDWAY MEN'S CLUB 41-1842630 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (dunng year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure

day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax

- Number of states where property subject to conservation easement is located ▶
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)
- and section 170(h)(4)(B)(ii)?

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenue included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Preservation of open space

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Schedule D (Form 990) 2014

Yes

Yes

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

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		WAY MEN'S							<u>42630</u>	
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures, c	or Oth	<u>er Simil</u>	<u>ar Asse</u>	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	any of the	following tha	t are a s	significant	use of its	collection	items
	(check all that apply).									
а	Public exhibition	· ·	d 📙 '	Loan or exc	hange progra	ams				
b	Scholarly research	•	e ¹	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	XIII	
5	During the year, did the organization solicit of					er sımıla	r assets	_	7	
—	to be sold to raise funds rather than to be m								<u>Yes</u>	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		lete if the	organizatio	n answered '	"Yes" to	Form 990), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets no	t ıncluded			
	on Form 990, Part X?					_		. [_	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:						_
									Amount	
С	Beginning balance						1c			
d	Additions during the year	• •	-				1d			
е	Distributions during the year						1e			
f	Ending balance						1f	L		
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21, for e	escrow or co	ustodial acco	unt liabi	ılıty? .		Yes	No No
	If "Yes," explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete	f the organization a	nswered	"Yes" to Fo						<u>.</u>
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance	ļ			ļ					
	Contributions .				-					
	Net investment earnings, gains, and losses									
	Grants or scholarships				ļ					
е	Other expenditures for facilities									
	and programs				 			_		
	Administrative expenses		-		 					
g	End of year balance	L	<u> </u>		1		_	-		
2	Provide the estimated percentage of the cur	rent year end balan		g, column (a	a)) neid as.					
a	Board designated or quasi-endowment		%							
	Permanent endowment	%								
С	Temporarily restricted endowment	%								
0-	The percentages in lines 2a, 2b, and 2c short	•		at ara bald a	ad administa	und for t	the erees	-at.an		
за	Are there endowment funds not in the posse	ession of the organiz	zauon ina	at are nero a	ina aaministe	ered for	ine organi	zation	T.	/aa Na
	(i) unrelated organizations								3a(i)	es No
	(i) unrelated organizations(ii) related organizations		•		•			•	3a(ii)	
h	If "Yes" to 3a(ii), are the related organization	e listed as required.	on Scher	dule R2	•				3b	_
4	Describe in Part XIII the intended uses of the	•							OD	
	t VI Land, Buildings, and Equipn		OWINGIA	idildo.						
ъ	Complete if the organization answere		0. Part IV	, line 11a S	See Form 990	, Part X,	line 10			
	Description of property	(a) Cost or			t or other		ccumulate	ed	(d) Book	value
		basis (invest			(other)	٠,	preciation	1	• • • • • • • • • • • • • • • • • • • •	
1a	Land									
	Buildings								,	······································
С	Leasehold improvements									
d	Equipment			2	0,000.		10,0	00.	10	,000.
е	Other									
Total	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Par	t X, colur	nn (B), line	10c)				10	,000.

Schedule D (Form 990) 2014

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

Schedule D (Form 990) 2014

▶

432053 10-01-14

(8) (9)

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

SCHEDULE I (Form 990)

Department of the Treasury

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

2014

Open to Public

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

Open to Public Inspection

% X Employer identification number 41-1842630 (h) Purpose of grant or assistance COUTH ACTIVITIES YOUTH ACTIVITIES YOUTH ACTIVITIES YOUTH ACTIVITIES YOUTH ACTIVITIES YOUTH ACTIVITIES Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 4,000. 3,000 500 3,000 19,500 1,800 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table THE MIDWAY MEN'S CLUB 300 300 41-6029683 20-3000282 41-1677725 41-1572838 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? NORTHERN STAR COUNCIL, BOY SCOUTS 1 (a) Name and address of organization OF AMERICA - 393 MARSHALL AVENUE FRIENDS OF ST PAUL LIBRARY 325 CEDAR STREET, NO. 555 or government 15 KELLOGG BLVD, WEST SAINT PAUL, MN 55104 SAINT PAUL, MN 55102 SAINT PAUL, MN 55102 SAINT PAUL, MN 55102 SAINT PAUL, MN 55101 MN 55104 FRANCISCAN BROTHERS Name of the organization CITY OF SAINT PAUL 1028 VAN SLYKE AVE GROVELAND PARK IEP DUNNING BOOSTERS 1289 LAFOND AVE SAINT PAUL, PO BOX 4037 Part II Part I

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

Schedule I (Form 990) (2014)

Schedule	e I (Form 990)	THE	MIDWA	THE MIDWAY MEN'S CLUB	S	TruB								41-1842630	Page 1
Part II	Continuation o	f Grants	and Other	Assistanc	e to Go	vernmen	its and O	Organizati ®	ions in the	United Sta	es (Scheduk	e I (Form 990)), Part II)		

(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g)	Assistance to GC	(c) IRC section	(d) Amount of	(e) Amount of	dule I (Form 990), Par (f) Method of	(g) Description of	(h) Purpose of grant
organization or government		ıf applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
FRIENDS OF OXFORD POOL 270 LEXINGTON PKWY N SAINT PAUL, MN 55104	20-3715846	501(C)(3)	2,250,	0.0			YOUTH ACTIVITIES
URBAN BOATBUILDERS 2288 UNIVERSITY AVENUE W. SAINT PAUL, MN 55114	41-1831598	501(C)(3)	1,500	0			XOUTH ACTIVITIES
CYCLES FOR CHANGE 712 UNIVERSITY AVE W SAINT PAUL, MN 55104	41-1816453	501(C)(3)	2,000,	0			YOUTH ACTIVITIES
KEYSTONE COMMUNITY SERVICES 2000 SAINT ANTHONY AVE SAINT PAUL, MN 55104	41-0693924	501(C)((3)	1,000	0			YOUTH ACTIVITIES
	26-2115150	501(C)((3)	1,000,	0			YOUTH ACTIVITIES
GIRLS SCOUTS OF MN AND WI RIVER VALLEYS INC - 400 ROBERT STREET SOUTH - SAINT PAUL, MN 55107	41-0693910	501(C)((3)	3,000.	0			XOUTH ACTIVITIES
ASSISTANCE LEAGUE 6416 PENN AVENUE SOUTH RICHFIELD, MN 55423	41-1736323	501(C)((3)	1,500.	0			XOUTH ACTIVITIES
WEST MINNEHAHA BOOSTERS 1090 HILLCREST DR WOODBURX, MN 55125	45-3085222	501(C)((3)	1,500,	0			YOUTH ACTIVITIES
ST, PAUL PARK AND REC 1500 RICE STREET SAINT PAUL, MN 55117		SOV	2,000.	0			YOUTH ACTIVITIES
							Schedule I (Form 990)

Schedule I (Form 990) THE MIDWAY MEN'S CLUB Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Y MEN'S C	CLUB Sovernments and Organ	nizations in the Ur	iited States (Sche	edule I (Form 990), Pa		41-1842630 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDGCUMBE COMMUNITY CENTER HOCKEY BOOSTER CLUB (AKA EDGUMBE HOCKEY) - 1866 YORKSHIRE AVE - SAINT PAUL, MN 55116	36-3455090	501(C)((3)	1,725,	0			YOUTH ACTIVITIES
ST. PAUL CAPITALS HOCKEY ASSOCIATION - PO BOX 16382 - SAINT PAUL, MN 55116	41-1229768	501(C)((3)	1,725,	0			YOUTH ACTIVITIES
SAINT STEPHANUS LUTHERAN CHURCH 739 LAFOND AVE SAINT PAUL, MN 55104	41-6094621	501(C)((3)	1,500,	0			YOUTH ACTIVITIES
MATERNITY OF MARY 592 ARLINGTON AVE W SAINT PAUL, MN 55117	41-1654467	501(C)((3)	1,000.	0			YOUTH ACTIVITIES
CENTRAL LUTHERAN SCHOOL 775 LEXINGTON PKWY N SAINT PAUL, MN 55104	41-6008777	501(C)((3)	3,000.	0			YOUTH ACTIVITIES
NATIONAL KARATE ACADEMY OF THE MARTIAL ARTS - 3549 LEXINGTON AVE NORTH - ARDEN HILLS, MN 55126	,		1 000	0			YOUTH ACTIVITIES
YOUNG MENS CHRISTIAN ASSOCIATION OF THE GREATER TWIN CITIES - 2125 EAST HENNEPIN AVE - MINNEAPOLIS, MN 55413	45-2563299	501(C)((3)	3 000	0			YOUTH ACTIVITIES
							Schedule I (Form 990)

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41-1842630

THE MIDWAY MEN'S CLUB

Schedule I (Form 990) (2014)

Part III

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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

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

THE MIDWAY MEN'S CLUB	41-1842630
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
PRESCRIBED NEIGHBORHOOD IS LOCATED "MIDWAY" BETWEEN DOWNT	OWN ST. PAUL
AND DOWNTOWN MINNEAPOLIS AND IS A LARGE URBAN AREA.	
FORM 990, PART VI, SECTION A, LINE 6:	
THE ORGANIZATION HAS MEMBERS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
THE ORGANIZATION HAS MEMBERS THAT HAVE THE POWER TO ELECT	THE BOARD
MEMBERS.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE FORM 990 IS NOT REVIEWED BY THE GOVERNING BOARD BEFOR	E IT IS FILED.
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	