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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -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)

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

2015

DLN: 93493315031006 OMB No 1545-0047

Treas		enue Servic		t Form 990 and its instructions is at <u>w</u>	ww IRS qo	v/form990		Inspection			
			endar year, or tax year beginnir	ng 04-01-2015 , and ending 03-31-20	16						
B Ch		pplicable	C Name of organization Women's Foundation of Minnesota	· · · · · ·		D Emplo 41-1	-	identification number			
<u> </u>	ame ch ntial ret	•	Doing business as								
_	inal /termin nended		Number and street (or P O box if n 105 5th Ave S No 300	nail is not delivered to street address) Room/si	uite	E Teleph		number 7 - 5 0 1 0			
Ap	plication	n pending	City or town, state or province, cou Minneapolis, MN 55401	ntry, and ZIP or foreign postal code		G Gross	receip	ots \$ 5,861,325			
			F Name and address of princip	oal officer	H(a) I	s this a group	p reti	urn for			
			Lee Roper-Batker 105 5th Ave S No 300 Minneapolis, MN 55401			ubordinates? No ire all subord		Γ Yes √			
I Ta	x-exen	npt status	√ 501(c)(3)	(insert no) 4947(a)(1) or 527	' "	ncluded?		1 165 110			
J W	ebsite	e:► WW	W WFMN ORG			r 'No,' attaci Group exemp		st (see instructions)			
K For	m of or	ganızatıon	✓ Corporation Trust Associa	ation Other ►		of formation 1		M State of legal domicile			
Pa	rt I	Sum	mary								
	1 B	riefly des	scribe the organization's mission								
an an	<u> </u>	o invest	ın social change to achieve equ	ality for all women and girls in Minneso	ta						
anc.											
Governance	2	hack th	us hov • 🗀 if the organization d	scontinued its operations or disposed	of more th	an 25% of it	c not	t accete			
G0V	- `	SHEEK III	is box F If the organization a	iscontinued its operations of disposed	or more cr	1411 25 70 01 10					
×			-	ing body (Part VI, line 1a)			3	20			
Activities &				of the governing body (Part VI, line 1b)	•		4				
ÇŢ.			mber of individuals employed in a		5						
ĕ			·	ecessary)			6 7a	168			
				om Form 990-T, line 34			7b				
						Prior Year		Current Year			
	8	Contri	butions and grants (Part VIII, I	ne 1h)		2,708	,698	4,184,722			
Ģ	9	Progra	ogram service revenue (Part VIII, line 2g)		0						
Ravenue	10	Invest	tment income (Part VIII, columi	n (A), lines 3, 4, and 7d)		306		<u> </u>			
<u>ac</u>	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line					92,841			
	12	Totalı 12)	revenue—add lines 8 through 11	(must equal Part VIII, column (A), lir	.1, column (A), line			4,559,97			
	13	Grants	s and sımılar amounts paıd (Part		1,815	,552	1,988,47				
	14	Benefi	ts paid to or for members (Part 1	IX, column (A), line 4)			0	(
S	15			ee benefits (Part IX, column (A), lines		1,210	,351	1,333,827			
Expenses	16a	5-10)		, column (A), line 11e)			0				
e d	ь		indraising expenses (Part IX, column (D		•						
Ξ	17		- , , , ,	lines 11a-11d, 11f-24e)		788	,755	698,509			
	18			st equal Part IX, column (A), line 25)		3,814					
	19	Reven	ue less expenses Subtract line	18 from line 12		-676	,432	539,163			
Net Assets or Fund Balances					Beginn	ing of Current	Year	End of Year			
sset	20	Total	assets (Part X, line 16)			24,589	,653	24,412,081			
ž Ž	21	Total I	liabilities (Part X, line 26)			739	,673	867,602			
žŢ	22	_	ssets or fund balances Subtract	line 21 from line 20		23,849	,980	23,544,479			
Unde my k	nowled	alties of p		amined this return, including accompai nplete Declaration of preparer (other t				•			
		****				2016-11-10					
Sign		Signa	nature of officer Date								
Her	е		Roper-Batker President/CEO or print name and title								
			Print/Type preparer's name Deb Nelson CPA		Date 2016-11-10	Check If	PTII	N .264758			
Pai		-		2.55 (16.55), 6.77		self-employed Firm's EIN ▶ 4					
	pare	;r ₋	Firm's name	300		Phone no (61)					
Use	On	ly 📋	Minneapolis, MN 5540				,				
May	the IR	.S discus		hown above? (see instructions)			_	. √Yes No			

orm 9	90 (2015) Pa	ge 2
Part		Statement of Program Service Accomplishments	
	D	Check if Schedule O contains a response or note to any line in this Part III	. 🗸
1		ly describe the organization's mission	
O IIIV	estin	social change to achieve equality for all women and girls in Minnesota	
2	Old th	ne organization undertake any significant program services during the year which were not listed on	
	he pr	rior Form 990 or 990-EZ?	
	servi	ne organization cease conducting, or make significant changes in how it conducts, any program ces?	
	f"Ye	s," describe these changes on Schedule O	
	exper	ribe the organization's program service accomplishments for each of its three largest program services, as measured by uses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, utal expenses, and revenue, if any, for each program service reported.	
4a	(Code	e) (Expenses \$ 2,239,589 including grants of \$ 1,918,277) (Revenue \$)	
	wome great Chan to color Found Wom the F Febru F	makinghi FY16 (Apr 1, 2015 - Mar 31, 2016), the Foundation awarded \$2 6 million to create equal opportunity and build pathways to economic security in and grifs who experience the greatest dispantates in outcomes, particularly low-income women and grifs, women and grif or Minnesota in provided (and control of Minnesota) in the provided of Minnesota in provided (education and policy grants) The Women's Foundation of Minnesota has the following grantmaking funds Social green (SCF), Pathways to Prosperty (P2P) Fund, grants [First Pathways to Prosperty (P2P) Funds (and grants) and and sold of inclusivity are reflected in the demographics of all three of the funds Social Change Fund Through this fund for the provided sold of the provided s	is from the
4b	the U gather prese 2015, from conve exper panel produ	e) (Expenses \$ 348,412 including grants of \$) (Revenue \$) arch, Education, and Public PolicyStatus of Women and Girls in MinnesotaStatus of Women & Girls in Minnesota is an ongoing collaborative research project inversity of Minnesota Humphrey School's Center on Gender, Women & Public Policy, launched in 2009 Annually, data specific to Minnesota women and gred, analyzed and published in economics, safety, health, and leadership. The research is shared statewide through community listening sessions, including intations and focus groups. The research and community input informs the Foundation's grantmaking and policy agenda Listening SessionsOn November 3, in partnership with the White House Council on Women and Girls, the Women's Foundation convened two listening sessions for young women and advocates Somali and East African communities and American Indian communities. The sessions enabled each community to form its own panels to allow for de research and collutions with the invited philanthropy and policy leaders in the audience. Then, advocates extended those conversations in a second, adding research, data and historical trends to further illuminate and support the young women's narratives. After the listening sessions, the Foundation iced a report, Listening to Young Women of Color & Advocates, documenting the information shared by the panels. The listening sessions in November was a series of statewide, community-based listening sessions the Women's Foundation is convening across Minnesota in the summer of 2016 - all part of the summer of 2016 in the summer of 2016 and part of the summer of 2016 in the summer of 201	girls in o, ates eper es, d

presentations and focus groups. The research and community input informs the Foundation is grantmaking and policy agenda Listening SessionsOn November 30, 2015, in partnership with the White House Council on Women and Girls, the Women's Foundation convened two listening sessions for young women and advocates from the Somali and East African communities and American Indian communities. The sessions enabled each community to form its own panels to allow for deeper conversation around economics, racism and culture, school and education, societal and gender norms, safety, and health. The young women shared their stones, expenences, wisdom, and solutions with the invited philanthropy and policy leaders in the audience. Then, advocates extended those conversations in a second panel, adding research, data and historical trends to further illuminate and support the young women's narratives. After the listening sessions, the Foundation produced a report, Listening to Young Women of Color & Advocates, documenting the information shared by the panels. The listening sessions in November were the first in a senes of statewide, community-based listening sessions the Women's Foundation is convening across Minnesota in the summer of 2016 - all part of the Foundation's ongoing ethos of listening and investing in community wisdom and solutions. The Foundation will hold sessions in the African American, Latina, Hmong and Karen, Disabilities, LTBQ and gender nonconforming, and Greater Minnesota communities, and will again produce reports documenting the sessions and young women's solutions to the challenges they face. The information gathered from the sessions will also help the Foundation develop a statewide agenda for gender and racial equity and increase resources for girls and women across Minnesota with the greatest dispanties in outcomes. Mapping the MarketMapping the Demand for Sex with Trafficked People in Minnesota, the second in a sense of research reports commissioned and funded by the Foundation and produced by the Uni

4c (Code) (Expenses \$ 817,127 including grants of \$ 70,200) (Revenue \$)

Building Philanthropy for Gender EqualityA critical part of the Foundation's work is helping women understand the power they have to change the world through their personal philanthropy. Through the Foundation's Building Philanthropy for Gender Equality program, women are invited to step into their philanthropic leadership and power. This occurs through sponsoring donor workshops, and giving women options, such as opening a donor advised fund and/or making a planned gift *

Convened annual fundraising event, The Stir, with keynote Rebecca Jarvis, ABC News Chief Business and Economics Correspondent, who interviewed a panel of three extraordinary Minnesota leaders, including Lili Hall, founder and president, Knock, Inc., Cindy Kent, president and general manager, 3M Drug Delivery Systems, and Wendy Nelson, director, Carlson * Donor-Centered Grantmaking Ripley Memonal Foundation, a donor advised fund of the Women's Foundation of Minnesota, awarded \$70,200 in grants to 10 organizations focused on teen pregnancy prevention in Ramsey and Hennepin counties. The grant period is January 1, 2016 to December 31, 2016 * Engaged one Reatha Clark King Fellow, and two Diversity Interns to create a pipeline of leadership opportunities for women of color in philanthropy and nonprofits * Benefitted from the generosity of 30 volunteers

) (Revenue \$

Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$

4e

Total program service expenses ► 3,405,128

3,103,120

VIII, IX, or X as applicable

If "Yes," complete Schedule D, Part X 🛸

17

Dar	t IV Checklist of Required Schedules			
-0	Checklist of Required Scheddles		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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 뉯	2	Yes	
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 $I \supseteq 1$	3		No
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	Yes	
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		No
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	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII,

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

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 💆 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 🐕

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that

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 🥦

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 🔧 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 🛂

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🐒

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*.

assistance to or for foreign individuals? If "Yes," complete Schedule F, Paits III and IV 🔒 🔒 💆

14a Did the organization maintain an office, employees, or agents outside of the United States?

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Nο

Νo

Νo

Νo

Νo

Νo

Νo

Nο

Νo

Nο

Form 990 (2015)

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11b

11c

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14a

14b

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20a

instructions for applicable filing thresholds, conditions, and exceptions)

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31

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Pait I

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I 🖠

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

28a

28b

28c

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35a

35b

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37

38

Yes

Yes

Yes

Form 990 (2015)

Νo

Νo

Nο

Nο

Nο

Nο

Νo

Nο

Nο

Nο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Paits I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			
	Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
	24d	
Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Pait I</i>	25a	No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No

orm	990 (2015)			Page !
Pai	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	<u></u>		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 17		Yes	No
	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?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
32	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No.
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		NO
	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		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	,	5 c		
	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		No
	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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7 c		No No
А	file Form 8282?	70		NO
-	The rest, indicate the number of rolling decreased and gate year.			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		l No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7£		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	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?			
0-	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No No
10	Section 501(c)(7) organizations. Enter			
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			
11	facilities Section 501(c)(12) organizations. Enter	I		I
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
-	Te the organization licenced to issue qualified health plans in more than one state? Note: Cos the instructions for			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	in which the organization is needed to issue qualified neutri plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	 14a		l I No
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14a 14b		140

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

	check in behiculate of contains a response of note to any fine in this fact vi		 	 	•	•	•		
3	ction A. Governing Body and Management	, and the second							
								Yes	N
1	Enter the number of voting members of the governing body at the end of the tax year	1a			20				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								

b Enter the number of voting members included in line 1a, above, who are

20 1h

2 3

Νo 4 5

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 person? Did the organization make any significant changes to its governing documents since the prior Form 990 was Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?

7a

Νo Νo Νo Νo Νo Νo

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Did the organization contemporaneously document the meetings held or written actions undertaken during the Yes **b** Each committee with authority to act on behalf of the governing body? Yes

10b

11a

12a

12h

12c

13

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Νo

year by the following

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records

►Heidi Walsh 105 Fifth Avenue South Suite 300 Minneapolis, MN 55401 (612) 337-5010 Form 990 (2015)

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

10a Did the organization have local chapters, branches, or affiliates?

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Governance, Management, and Disclosure

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

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

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

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

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

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

——————————————————————————————————————										
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer tor/t	not one n is and rusi		an	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Jean Adams	3 00	х		x				0	0	0
(2) Joanne Green Vice Chair	2 00	×		×				0	0	0
(3) Susan Denk Treasurer	2 00	х		х				0	0	0
(4) Michael Resnick Secretary	2 00	x		x				0	0	0
(5) Tawanna Black Trustee	2 00	х						0	0	0
(6) Cecilia Cervantes Trustee	1 00	х						0	0	0
(7) John Choi Trustee	1 00	х						0	0	0
(8) Julie Corty Trustee	1 00	×						0	0	0
(9) Pauline Fofana Trustee	2 00	х						0	0	0
(10) Katharine Hull Trustee	1 00	х						0	0	0
(11) Katharine Kelly Trustee	1 00	х						0	0	0
(12) June La Valleur Trustee	1 00	х						0	0	0
(13) Victoria McWane-Creek Trustee	2 00	х						0	0	0
(14) Elizabeth Olson Trustee	2 00	х						0	0	0
										Form 990 (2015)

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

(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensatio from related organizations (W- 2/1099-	n ar com fr	(F) timated nount of other pensation om the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	an	anization d related inizations
(15) Ashley Rajaratnam	1 00	×						0		0	
Trustee		^						0		U	
(16) Lucy Rogers	2 00	V						0		0	
Trustee		X						0		0	
(17) Roderic Southall	2 00							_			
Trustee		X						0		0	
(18) April Sutor	1 00										
Trustee		×						0		0	
(19) Rosa Tock	1 00										
Trustee		X						0		0	
(20) Vicki White	2 00										
The state of		Х						0		0	
Trustee (21) Lee Roper-Batker	55 00										
				х				230,772		0	14,76
President/CEO (22) Heidi Walsh	45 00										
(22) Helul Walsh				х				68,112		0	15,02
Dir Finance & Human Capital	45.00										
(23) Terry Williams	45 00					Х		130,146		0	8,71
Vice President								· ·			
1b Sub-Total				▶							
c Total from continuation sheets to Part VII	I, Section A .			▶							
d Total (add lines 1b and 1c)				•			42	29,030	0		38,499
Total number of individuals (including but n \$100,000 of reportable compensation from			ed al	oove	e) w	ho red	eiv	ed more than			
										Ye	s No
3 Did the organization list any former officer, on line 1a? <i>If "Yes," complete Schedule J for</i>							_	st compensated	employee 3		No
For any individual listed on line 1a, is the s organization and related organizations grea individual											
5 Did any person listed on line 1a receive or services rendered to the organization? If "Y									_		No

56	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractors that recompensation from the organization. Report compensation for the calendar year ending		
	(A)	(B)	(C)
	Name and business address	Description of services	Compensa

\$100,000 of compensation from the organization \blacktriangleright 0

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

(C) Compensation

Form 990 (2015)

Form 99	•	•						Page S
Part \	/1111	Statement of						
		Check If Sched	ule O contains a respo	nse or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ν <u>ν</u>	1a	Federated cam	paigns 1a					
ant	Ь	Membership di	ies 1b					
G.	c	Fundraising ev	ents 1 0	116,437				
ifts. ar A	d	Related organiz	zations 1d					
E G	e	Government grant	rs (contributions) 1e					
ions	f	All other contributi	ons, gifts, grants, and 1f	4,068,285				
but the	g	similar amounts no	ot included above ons included in lines	254.750		i		
Contributions, Gifts, Grants and Other Similar Amounts		1a-1f \$		354,768	4 404 722			
<u>C</u>	h	Total. Add line	s 1a-1f		4,184,722			
ZI e	2a			Business Code				
ie Vei	Ь							
9. EE	c							
er <u>«</u>	d							
S E	e							
Program Service Revenue	f	All other progra	am service revenue					
<u> </u>	g	Total. Add line	s 2a-2f	•				
	3		ome (including dividen		301,627			301,627
	4		stment of tax-exempt bond					
	5	Royalties .	<u></u>	🔸				
	6a	Gross rents	(ı) Real	(II) Personal				
	Ь	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	1,172,787					
	b	Less cost or other basis and	1,192,001					
	c	sales expenses Gain or (loss)	-19,214					
	d		Ss)		-19,214			-19,214
enne/	8a	events (not inc	luding 5,437					
Other Revenue	ь	See Part IV, III	s reported on line 1c) ne 18 a penses b	154,574				
0	c		(loss) from fundraising		85,226			85,226
	9a	Gross income t See Part IV, lir	from gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti					
	10a	Gross sales of returns and allo						
	b		oods sold b					
	С	Net income or Miscellaneou	(loss) from sales of inv					
	11a	O ther income	s kevellue	Business Code 900099	7,615	7,615		
	b	o and income			•	•		
	c							
	d	All other reven	ue					
	e	Total. Add line	s 11a-11d	•	7,615			
	12	Total revenue.	See Instructions .	· · · · · •	4,559,976	7,615		367,639
								Form 990 (2015

Dowl	TV Statement of Europianal Evangues				rage 10
Part	Statement of Functional Expenses n 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	ations must com	unlete column (A.)	
<u>sectio</u>	Check if Schedule O contains a response or note to any line in t				
	Check if Schedule O contains a response or note to any line in the	nis Part IX			
Do no	t include amounts reported on lines 6b,	(4)	(B)	(C)	(D)
	, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,960,077	1,960,077		
2	Grants and other assistance to domestic 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	28,400	28,400		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and				
	key employees	344,769	177,549	164,627	2,593
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	780,508	618,886	160,350	1,272
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	47,827	39,872	7,955	
9	Other employee benefits	83,415	69,339	14,076	
10	Payroll taxes				
		77,308	55,678	21,359	271
11	Fees for services (non-employees)				
a	Management				
b	Legal	11,928	513	11,415	
С.	Accounting	18,710	175	18,535	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	242,817	159,192	83,516	109
12	Advertising and promotion	50	50		
13	Office expenses	60,134	37,567	21,314	1,253
14	Information technology	22,250	16,539	5,711	
15	Royalties				
16	Occupancy	106,403	79,093	27,310	
17	Travel	41,288	33,763	6,849	676
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	86,855	50,555	36,057	243
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	51,494	38,662	12,832	
23	Insurance	8,130	6,043	2,087	
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 O)				
а	Equipment	40,485	30,083	911	9,491
b	Members hip/Dues	2,787	511	2,276	
С	Sale/Transfer Fees	2,718	1,008	1,710	
d	Subscriptions	2,246	1,563	683	
е	All other expenses	214	10	204	
25	Total functional expenses. Add lines 1 through 24e	4,020,813	3,405,128	599,777	15,908
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)				

4,897,448 1,189,420

Form 9	90 (2015)			
Part	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(E
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	3,871,125	2	
	3	Pledges and grants receivable, net	806,016	3	
	4	Accounts receivable, net	10,938	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			
ssets	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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
Ass	7	Notes and loans receivable, net		7	
1	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	56,784	9	
		-			

479,218

295,954

206,315

600,000

-106,122

199,673

540,000

739,673

1,203,687

8,537,376

14,108,917

23,849,980

24,589,653

24,589,653

19,144,597

10c

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Net Assets or Fund Balances

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here >

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Complete Part VI of Schedule D

Less accumulated depreciation

Intangible assets . . .

Grants payable

Deferred revenue .

Other assets See Part IV, line 11

Tax-exempt bond liabilities .

Complete Part X of Schedule D

Unrestricted net assets

Investments—publicly traded securities

Accounts payable and accrued expenses

_		

	1	8	3	2	6
17,	3	9	7,	2	4
	6	0	0,	0	C
		4	9	1	e
24,	4	1.	2	0	8

237,602

630,000

867,602

1,738,911

7,635,971

14,169,597

23,544,479

24,412,08 Form 990 (2015)

95,546

rt XI	Reconcilliation of Net Assets
	Check if Schedule O contains a response or note to any line in this Part XI
Total	revenue (must equal Part VIII, column (A), line 12)

Revenue less expenses Subtract line 2 from line 1 . . .

Net unrealized gains (losses) on investments .

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Donated services and use of facilities .

Investment expenses

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

otal revenue (must equal Part VIII, column (A), line 12)			
otal expenses (must equal Part IX, column (A), line 25)			

Other changes in net assets or fund balances (explain in Schedule O) .

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Both consolidated and separate basis

If the organization changed its method of accounting from a prior year or checked "Other," explain in

Page **12**

4,559,976

4,020,813

539,163

23,849,980

23,544,479

No

Νo

Nο

Form 990 (2015)

Yes

Yes

Yes

2a

2b

2c

3а

3b

-844,664

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efil	le GF	RAPHIC pr	int - DO I	NOT PROCES	S As Filed Da	ta -		DLN: 93	3493315031006
SCHEDULE A (Form 990 or 990EZ)			▶:	omplete if the Information al	Charity Status organization is a sec 4947(a)(1) nonexo Attach to Formout Schedule A (Form	tion 501(c)(3) empt charitable 1990 or Form 9	organization of e trust. 90-EZ.	Ort r a section	2015 Open to Public Inspection
Treas	μrγ		wv	vw.irs.gov/fo	<u>rm990</u> .				Inspection
		enue Service he organizat	ion					Employer identific	ation number
		undation of Min						Employer identifie	acion namber
		_						41-1635761	
	rt I			-				part.) See instruction	ons.
	organı		•		iuse it is (For lines 1	-	•	•	
1					r association of churc				
2)(1)(A)(ii).(Attach S				
3		•	•	•	service organization				: N
4	l		research or name, city,		rated in conjunction i	with a nospital	aescribea in se	ction 170(b)(1)(A)(ii	i). Enter the
5	Г	An organi: 170(b)(1)	zation opera (A)(iv). (Co	ted for the ber omplete Part I	I)			a governmental unit	described in section
6				-	or governmental unit				
7	~				es a substantial part i). (Complete Part II		rom a governm	ental unit or from the	general public
8					ion 170(b)(1)(A)(vi)		rt II)		
9	_	receipts fr from gross organizati	om activitie investmen on after Jun	es related to it t income and i e 30,1975 S	s exempt functions—s	subject to certa xable income ((Complete Par	ain exceptions, less section 51 t III)	ributions, membership and (2) no more than 11 tax) from business	331/3% of its support
11	L		_		•		•	nctions of, or to carry (out the nurnoses of
a	' Г	one or mor the box in Type I. A s	e publicly s lines 11a th upporting o	upported orga irough 11d tha rganization op	nizations described in t describes the type i erated, supervised, o	section 509(a of supporting o r controlled by	rganization and its supported o	509(a)(2) See section complete lines 11e, organization(s), typicators or trustees of the	on 509(a)(3). Check 11f, and 11g lly by giving the
			-		rt IV, Sections A and	_			
b								orted organization(s), manage the supported	
c	Г	must comp	lete Part I\ inctionally i	/, Sections A a integrated. A s	nd C.	on operated in (connection with	, and functionally inte	
d		Type III no not functio	on-function nally integra	ally integrated ated The orga	l. A supporting organi nization generally mu	zation operate st satisfy a dis	d in connection tribution requir	with its supported org rement and an attentiv	
e		Check this	box if the o	rganızatıon re		mination from	the IRS that it	ıs a Type I, Type II, T	ype III functionally
f	Ente				ally integrated suppor ns		011		
g				-	out the supported orga				
		(i)		(ii)EIN	(iii)	(iv)	(v)	(vi)
Nar	ne of s	supported or	ganızatıon	, ,	Type of organization (described on lines 1-9 above (see instructions))	Is the orga listed in your docum	anization governing	A mount of monetary support (see instructions)	Amount of other support (see instructions)
						Yes	No		
 Tot a	<u> </u>								
		work Reduct	on Act Noti	ce, see the In	structions for Form 99	90 or 990EZ.	Cat No 112		n 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year **(b)**2012 (a)2011 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 17,368,078 4,184,722

1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	3,880,826	2,256,174	4,337,658	2,708,698	
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					
The value of services or facilities furnished by a governmental unit to the organization without charge					
4 Total. Add lines 1 through 3	3,880,826	2,256,174	4,337,658	2,708,698	
5 The portion of total contributions by each person (other than a					

governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5

Calendar year

and income from similar sources Net income from unrelated business activities, whether or not the business is regularly

10 Other income Do not include gain or loss from the sale of

11 Total support. Add lines 7

capital assets (Explain in Part

from line 4

carried on

through 10

organization

instructions

supported organization

VI)

12

14

Section B. Total Support

(or fiscal year beginning in) ▶

Amounts from line 4

Gross income from interest,

dividends, payments received on

Gross receipts from related activities, etc (see instructions)

Section C. Computation of Public Support Percentage

Public support percentage for 2014 Schedule A, Part II, line 14

securities loans, rents, royalties

342,929

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))

and **stop here.** The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

(a)2011

3,880,826

5,795

17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

16a 33 1/3% support test-2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

2,256,174 562,114

15,712

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

(b)2012

4,337,658

(c)2013

375,286

201

(d)2014

360,719

5,001

14

15

301,627

7,615

Schedule A (Form 990 or 990-EZ) 2015

(e)2015

4,184,722

17,368,078 4,184,722

1,942,675

34,324

19,345,077

892.005

76 110 %

68 470 %

▶ 🗸

▶□

(f)Total

17,368,078

2,644,779

14,723,299

Schedule A (Form 990 or 990-EZ) 2015 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	III II ale el gamzado	rano to quani	y arraor are too	to noted below	picase compi		
Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f)⊤otal
•	iscal year beginning in) ▶	(-,	(-,	(-,	(/	(-/	(, ,
1	Gifts, grants, contributions, and						
	membership fees received (Do						
_	not include any "unusual grants ")		+				
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
3	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
4	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
,	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
h	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
	the amount on line 13 for the year						
r	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
0	from line 6)						
Se	ction B. Total Support		1	1	1	I	1
	Calendar year		I	T	T		T
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
L0a	•						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
U	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)						
14	First five years. If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3) organization,
	check this box and stop here	-			,	. /	
Se	ction C. Computation of Pub	lic Support P	ercentage				• 1
15	Public support percentage for 2015			13 column (f))		15	
	,, ,	•	• •	. 15, 001411111 (1))		15	
16	Public support percentage from 201		<u>`</u>			16	
Se	ction D. Computation of Inv						
17	Investment income percentage for 3	2015 (line 10c, c	column (f) divided	by line 13, colun	nn (f))	17	

Investment income percentage from 2014 Schedule A, Part III, line 17

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support tests-2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

I, complete Sections A and D, and complete Part V)

Section	A. A	I Supporting Orga	ınizatio	ทร

Are all of the ingranuston's supported organizations listed by name in the organization's covering documents? If '80' described the designation of the three and continuing elebanoship, pages and if designated by closs or purpose, described the designation of that these and continuing elebanoship, pages and the designation of the three and continuing elebanoship, pages and the designation of the three and continuing elebanoship, pages and the designation of the three and continuing elebanoship, pages and the section of \$00(4)(10) or (2)? If '95', 'explain in Part VI have the elebanoship or the	Se	ection A. All Supporting Organizations			
If Yes, "describe the Part VI how the apported organizations listed by name in the organization's governing documents? If you'decide the Part VI how the supported organization are escipated if designated by class or purpose, describe the designation. If I hasteric and continuing relationship, soplain. 2. Did the organization have an supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If Yes, "answer (2) and (2) below. 2. Did the organization have a supported organization described in section 501 (c)(4), (5), or (6)? If Yes, "answer (6) and (2) below. 3. Did the organization nother that eith supported organization qualified under section 501 (c)(4), (5), or (6) and satisfied this public support to sets under section 509 (a)(2)? If Yes, "answer (6) and (2) below. 5. Did the organization ensure that all support to such organizations was used exclusively for section 170 (c)(2)(3). 3. C. If Yes, "answer (6) and (2) below. 6. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization has such control and discretion in deciding whether to make grants to the foreign supported organization supported organization and the does not have an IRS determination under sections 501 (c)(4) and 100 (c)(4) or (2) proported organization supported organization supported organization supported organization supported organization supported organization supported organization organization supported organization supported organization supported organizations. 6. Did the organization support any foreign supported organizations on that a does not have an IRS determination under sections 501 (c)(4) and 600 (c)(4) or (2) proported organizations organization proported organizations or the proported organizations organization supported organizations and supported organizations and supported organizatio		Colon At All Supporting Organizations		Yes	No
section 50(a)(1) or (2)? If "Yes," enamination have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below Did the organization chart make ach supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(2)(3) and 501(c)(4), (5), or (6) and satisfied the public support tests under section 501(c)(2)(4), (5), or (6) and satisfied the public support tests under section 501(c)(2)(4), (5), or (6) and satisfied the public support tests under section 501(c)(2)(4), or (5), or (6) and satisfied the public support tests under section 501(c)(2)(4), or (5), or (6) and satisfied the supported organization section sect	1	If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	1		
If "Yes," region in Part VI into the organization determined that the supported organization was described in section \$01(c)(4), (5), or (6)? 3a Did the organization have a supported organization qualified under section \$01(c)(4), (5), or (6)? b Did the organization confirm that each supported organization qualified under section \$01(c)(4), (6), or (6) and satisfied the public support tests under section \$09(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination of the public support that all support to such organization was used exclusively for section \$170(c)(2)(3) and purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," explain in Part VI what controls the organization and discretion despite being controlled or supportsed by or in commentor with its supported organizations? If "Yes," describe in Part VI what controls the organization and discretion despite being controlled or supportsed by or in commentor with its supported organizations? If "Yes," explain in Part VI what controls the organization that does not have an IRS determination under sections \$501(c)(3) and \$009(c)(4) in (2)? If "Yes," explain in Part VI what controls the organization seed to ensure that all support to the foreign supported organization supports any foreign supported organizations and supports of the supported organizations described in section (9) the organization and, substitution are removed, (ii) the reason for each such action, (iii) the authority under the organizations organizations as substituted in a supported organizations organizations as substituted supported organization part of a class already designated in the organizations organization support and part of the charactic set of the charactic set of the comment o	2				
3a June 1987 J		If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination C Did the organization ensure that all support to such organization on was used exclusively for section 170(c)(2)(8) 3c John Mark Was may supported organization not organization put in place to ensure such use 4a Was any supported organization not organization and discretion in deciding whether to make grains to the foreign supported organization? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below D Did the organization that unitimate control and discretion in deciding whether to make grains to the foreign supported organization? If "Yes" describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organization was used exclusively for section 170(c)(2)(8) pumposes C D Id the organization along ubstitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations during the terms of reach such action, (iii) the authority under the organization's organizing document? D Type I or Type II only, Was any added or substituted supported organizations during the terms of the supported organization or organization or organization or organization organization organization organization organization organization organization support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, or (c) other supported organizations or other similar organization support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, or (c) the supporting organization shall also support the organization organization and support (whether in the form of grants or the provision of serv	3a		3a		
purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and I you checked I fair of I in mart I, answer (o) and (c) below D off the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization where the organizations what is supported organizations used to ensure that discretion despite being controlled or supervised by Ir Yes, "explain in Part VI what controls with a control and discretion despite being controlled or supervised by Ir Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170((2)28) purposes 5a Did the organization of substitute, or remove any supported organizations during that xyear? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations dids, substitute, or the organization supports whether such substitution the organization support organization supports organization support organization supports and substitution the result of an event beyond the organization's control? C Substitutions only. Was the substitution the result of an event beyond the organization's control? 5b D ord the organization provide a grant, lean, compensation, or other similar payment to a substantial contributor or an order of the filing organization's supported organizations. If "Yes," complete An I of Schedule I, (form 990) 1b Use the organization provide a grant, lean, compensation, or other similar payment to a substantial contributor or a	t	satisfied the public support tests under section 509(a)(2)?	3b		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked II are II bin Part I, answer (b) and (c) below Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes" describe in Part VI how the organization had such control and discretion despite being controlled or supervised by a rin connection with its supported organization supported organization that does not have an IRS determination under sections \$01(c)(3) and \$09(a)(1) or (2)? If "Yes," explain in Part VI what courtes the organization used to ensure that all support to the foreign supported organization was used exclusively for section \$10(c)(2)(6) purposes 5a Did the organization and substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations deds, substituted, or removed, for the reasons or each such action, (iii) the authority under the organization deds, substituted uncernet; b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organization document; b Type I or Type II only. Was any added or substituted supported organizations or services or facilities) to anyone other than (a) its supported organizations, (c) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit or or more of the filing organizations supported organizations? If "Yes," complete Part I of Schedule I, (Form 990) 5b Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 49546(c))(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantia	c	purposes?	3 c		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substitute, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document or the organization's organizing document? b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? b Type I or Type II only. Was the substitution the result of an event beyond the organization's control? c Substitutions only. Was the substitution the result of an event beyond the organization's control? b Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization is supported organizations or the supporting organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990) b Did the organization make a l	4a	Was any supported organization not organized in the United States ("foreign supported organization")?	4a		
If "Yes," describe in Part VI how the aganization had such control and discretion despite being controlled or supervised by on in connection with its supported organization. C Did the arganization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509 (g(3)) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170c(p(2)(8) purposes. 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed (ii) the reasons for each such action, (iii) the authority under the organizations organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document. b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5b Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations or the state are part of the charitable class benefited by one or more of its supported organizations, (i) individuals that are part of the charitable class benefited by one or more of the filing organizations organizations? If "ex," provide detail in Part VI. 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)3)(c)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "ex," provide detail in Part VI. 9 Did the organization make a	b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(6) purposes 5a			4b		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the chantable class benefited by one or more of its supported organizations, (c) other supporting organizations that also support or benefit one or more of the filing organizations's supported organizations, (b) individuals that are part of the chantable class benefited by one or more of the filing organizations, (c) other supporting organizations that also support or benefit one or more of the filing organizations's supported organizations, (b) individuals that are part of the chantable class benefited by one or more of the filing organizations's supported organization, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in Ine 72 If "Yes," complete Part II of Schedule L (Form 990) 9a Was the organization and interest? If "Yes," provide detail in Part	c	sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
the organization's organizing document? c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c b Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organizations's supported organizations or if "Yes," provide detail in Part VI. 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990) 9a Was the organization make a loan to a disqualified person as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI. 9b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9c 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943 (f) (regarding certain Type II supporting organizations), and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization have any excess busine	5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was	5a		
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Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? 11a 11b	t		10b		
the governing body of a supported organization? 11a 1b A family member of a person described in (a) above? 11b	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described in (a) above?	a				
		the governing body of a supported organization?	11a		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	b	A family member of a person described in (a) above?	11b		
	c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		

Yes

Yes

2a

2b

No

No

Part IV	Supporting Organizations (continued)
Section	B. Type I Supporting Organizations

Section D. All Type III Supporting Organizations

Yes No 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 1 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that 2 operated, supervised or controlled the supporting organization Section C. Type II Supporting Organizations

1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or		ı
	trustees of each of the organization's supported organization(s)?		ı
	If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons		ı
	that controlled or managed the supported organization(s)	1	

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the 2 supported organization(s)

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? 3 If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)
 - The organization satisfied the Activities Test Complete line 2 below а

 - The organization is the parent of each of its supported organizations. Complete line 3 below b

 - The organization supported a governmental entity Describe in Part VI how you supported a government entity (see
 - instructions)
- 2 Activities Test_Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the

- - supported organization(s) to which the organization was responsive?
- - If "Yes," then in Part VI identify those supported organizations and explain how these activities directly
- furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of
- the organization's supported organization(s) would have been engaged in?
- If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have
- engaged in these activities but for the organization's involvement
- 3 Parent of Supported Organizations Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each 3b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

instructions)

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on N	ov 20,1970 See inst	ructions. All other
	Type III non-functionally integrated supporting organizations must complete	Sections	A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection or gross income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter $1 - 1/2\%$ of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

6

Section D - Distributions			Current Year
A mounts paid to supported organizations to accomp	olish exempt purposes		
2 A mounts paid to perform activity that directly further excess of income from activity			
3 Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4 Amounts paid to acquire exempt-use assets	1 1 3		
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru	. ,		
·	ictions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
С			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
<u> </u>			
a Applied to underdistributions of prior years			-
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
а			
b			
c Excess from 2013			
d From 2014			
e From 2015		<u> </u>	/F 000 000 == 1 /2 1
		Schedule A	(Form 990 or 990-EZ) (2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

chedule A (Form 990 or 990-EZ) 2015 Page 8									
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).									
	Facts And Circumstances Test								
Return Reference Explanation									
Schedule A, Part II, Line 10, Explanation of Other Income - 2011 Amount \$ 5,795 2012 Amount \$ 15,712 2013 Amount \$ 5,001 2015 Amount \$ 7,615									
	Schedule A (Form 990 or 990-EZ) 2015								

DLN: 93493315031006 Political Campaign and Lobbying Activities OMB No 1545-004 **SCHEDULE C** (Form 990 or For Organizations Exempt From Income Tax Under section 501(c) and section 527 990-EZ) ▶ 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 Open to Public Department of the **Inspection** www.irs.gov/form990. Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on 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" on 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 • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number Women's Foundation of Minnesota 41-1635761 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes □ No Was a correction made? □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 2 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) A mount paid from (e) A mount of political filing organization's contributions received funds If none, enter -0and promptly and directly delivered to a separate political organization If none,

enter -0-3

Other exempt purpose expenditures

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

Not over \$500,000

Over \$17,000,000

If the amount on line 1e, column (a) or (b) is:

(b) Affiliated

group totals

under section 501(h)). Check \blacktriangleright if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,

expenses, and share of excess lobbying expenditures)

 $\overline{}$ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures	
(The term "expenditures" means amounts paid or incurred.)	

organization's

totals

70,108

70,108

3,335,020

3,405,128

(a) Filing

Total lobbying expenditures to influence public opinion (grass roots lobbvina) Total lobbying expenditures to influence a legislative body (direct lobbying)

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Calendar year (or fiscal year

beginning in)

Total lobbying expenditures (add lines 1a and 1b)

Total exempt purpose expenditures (add lines 1c and 1d)

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

20% of the amount on line 1e

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

4-Year Averaging Period Under section 501(h)

columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

284,982

122,578

71,246

14,078

(b)2013

293.802

138.428

73,451

34,855

(a)2012

Lobbying nontaxable amount Enter the amount from the following table in both columns

The lobbying nontaxable amount is:

Yes

(c)2014

306,913

92,662

76,728

☐ No

320,256

80.064

(d)2015

320,256

70,108

80.064

Schedule C (Form 990 or 990-EZ) 2015

(Some organizations that made a section 501(h) election do not have to complete all of the five

(e) Total

1,205,953

1,808,930

423,776

301,489

452,234

48.933

Page **3**

•		lection under section 501(h)).	((a)		(b)	
ror ea <u>activ</u>	,	th 11 below, provide in Part IV a detailed description of the lobbying		No		A mount	t
1	legislation, including any attempt through the use of	nization attempt to influence foreign, national, state or local to influence public opinion on a legislative matter or referendum,	Yes				
а	Volunteers?			 	4		
b	Paid staff or management (include Media advertisements?	compensation in expenses reported on lines 1c through 1i)?		┼	4		
C C		or the nublic?	<u> </u>	+	+		
d	Mailings to members, legislators,	·		+	+		
e	Publications, or published or broad			+	+-		
f	Grants to other organizations for le		<u> </u>	+	+-		
g		eir staffs, government officials, or a legislative body?		 	+		
h		, conventions, speeches, lectures, or any similar means?		 	+		
i	Other activities?			_	+		
j	Total Add lines 1c through 1i						
2a		he organization to be not described in section 501(c)(3)?			4		
b	If "Yes," enter the amount of any t				<u> </u>		
C	•	tax incurred by organization managers under section 4912			<u> </u>		
		section 4912 tax, did it file Form 4720 for this year?	<u></u>		\bot		
Par	t III-A Complete if the org 501(c)(6).	ganization is exempt under section 501(c)(4), section	501 (c	:)(5), 	or se	ection	າ
						Yes	No
1	, ,	ore) dues received nondeductible by members?		[1		
2	Did the organization make only in-	house lobbying expenditures of \$2,000 or less?		[2		
3		y over lobbying and political expenditures from the prior year?			3		
Par		ganization is exempt under section 501(c)(4), section ther (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."					
1	Dues, assessments and similar ar	nounts from members	1	\Box			
2	Section 162(e) nondeductible lobber expenses for which the section 52	bying and political expenditures (do not include amounts of political 17(f) tax was paid).					
а	Current year		2a	<u> </u>			
b	Carryover from last year		2b				
c	Total		2c				
3	Aggregate amount reported in sec	tion 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		nt on line 2c exceeds the amount on line 3, what portion of the excess ryover to the reasonable estimate of nondeductible lobbying and	4				
5		olitical expenditures (see instructions)	5	+			
_	art IV Supplemental Info	· · · · · · · · · · · · · · · · · · ·			-		
Pro	ovide the descriptions required for P	art I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro 1 Also, complete this part for any additional information	oup list)	, Part I	I-A,lı	ines 1	and
2 (Return Reference	Explanation					
	Recuir Reference	Explanation					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D**

(Form 990)

DLN: 93493315031006 OMB No 1545-0047

2015

Supplemental Financial Statements

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

Treas	rtment of the sury nal Revenue Service	Information about Schedule D	► Attach to Form 990. (Form 990) and its instructions is at <u>www.irs</u>	s.gov/f		en to P Inspect	
Name of the organization				Empl	oyer identification	on numbe	er
Wo	men's Foundation of	Minnesota		41-1	635761		
Pa			Advised Funds or Other Similar Formed "Yes" on Form 990, Part IV, line 6.				
		<u>-</u>	(a) Donor advised funds	(b)	Funds and other	accounts	i
1	Total number	rat end of year	44				
2	Aggregate va year)	alue of contributions to (during	493,580				17,00
3	Aggregate va	alue of grants from (during year)	674,835				15,00
4	Aggregate va	alue at end of year	5,464,822				3,08
5	_		advisors in writing that the assets held in don the organization's exclusive legal control?	or advis		√ Yes	┌ No
6	used only for ch		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for ar			√ Yes	☐ No
Pa		·	ete if the organization answered "Yes" o	n Forn	•		1 110
1			e organization (check all that apply)				
	•	on of land for public use (e g , recr					
	education) — _		Preservation of a				
	<u>. </u>	of natural habitat	Preservation of a	certifie	d historic structi	ıre	
_	•	on of open space	h - d	h - 6			
2	•	2a through 2d if the organization le last day of the tax year	held a qualified conservation contribution in t	he form	T		
а	Total number o	f conservation easements		2a	Held at the E	nd of the	Year
a b		estricted by conservation easeme	ents	2b			
c		servation easements on a certified		2c			
d	Number of cons		c) acquired after 8/17/06, and not on a	2d			
3	Number of cons	servation easements modified, tra	nsferred, released, extinguished, or terminate	d by the	e organızatıon du	ring the	
	tax year ▶						
4	Number of state	es where property subject to cons	ervation easement is located >				
5		ızatıon have a wrıtten policy regar enforcement of the conservation e	ding the periodic monitoring, inspection, hand easements it holds?	dling of	☐ Yes	No	0
6	Staff and volunt year	teer hours devoted to monitoring,	inspecting, handling of violations, and enforci	ng cons	ervation easeme	ents durin	ng the
	-						
7	A mount of expe ► \$	enses incurred in monitoring, inspe	ecting, handling of violations, and enforcing co	onserva	ition easements (during the	e year
8		servation easement reported on li on 170(h)(4)(B)(II)?	ne 2(d) above satisfy the requirements of sec	tion 17	0(h)(4) Yes	No	0
9	balance sheet,		ts conservation easements in its revenue and of the footnote to the organization's financial sements.		· ·		
Par	t IIII Organi	zations Maintaining Collec	ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	ier Similar As	sets.	
1a	If the organizat works of art, his	ion elected, as permitted under SI storical treasures, or other similar	FAS 116 (ASC 958), not to report in its rever assets held for public exhibition, education, note to its financial statements that describe	or resea	arch in furtherand		
b	works of art, his		FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education, these items				IC
((i) _{Revenue inclu}	ded on Form 990, Part VIII, line	ı	> \$			
(i	ii) Assets include	ed in Form 990, Part X	1				
2	If the organizat	ion received or held works of art, h	nistorical treasures, or other similar assets fo SFAS 116 (ASC 958) relating to these items				

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Sche	dule D	(Form 990) 2015						Page
Par	t III	Organizations Maintaining Collections of Art (continued)	, Hi	stori	cal Tre	easures,	or Ot	her Similar Assets
3		g the organization's acquisition, accession, and other recor ction items (check all that apply)	ds,c	heck a	iny of th	ie following	that ar	e a significant use of its
а		Public exhibition	d		Loan	or exchang	e progra	ams
b	Г	Scholarly research	e		Other			
c		Preservation for future generations						
4	Provi Part :	de a description of the organization's collections and expla XIII	ın ho	w they	further	the organi	zation's	exempt purpose in
5		ng the year, did the organization solicit or receive donations ts to be sold to raise funds rather than to be maintained as						
Pa	rt IV	Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on F Part X, line 21.	orm	990,	Part IV	/, line 9, d	or repo	orted an amount on Form 990,
1a		e organization an agent, trustee, custodian or other interme ded on Form 990, Part X?	ediar	y for c	ontributi	ions or oth	er asse	ts not Yes No
b	If	"Yes," explain the arrangement in Part XIII and complete t	he fo	llowin	g table			A mount
c	Ве	ginning balance					1 c	
d	A d	ditions during the year					1d	
е	Dis	stributions during the year					1e	
f	Εn	ding balance					1 f	
2a	Did tl	he organization include an amount on Form 990. Part X. lin	e 21	fores	crow or	custodial.	account	liability?

_	Distributions during the year	10				
f	Ending balance	1 f				
2 a	Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial a	ccount	: liability?	☐ Yes	☐ No	
						_

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

	IT Test explain the arrangement in Far	e MIII eneck nere	in the explanation in	as been provided in	Tare Alli	• • • • —
Pa	rt V Endowment Funds. Comple	ete if the organiz	ation answered "	Yes" to Form 990	, Part IV, line 10	
		(a)Current year	(b) Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	19,793,093	18,619,446	17,376,743	16,151,378	16,319,446

	The state of the state of games and the state of games and the state of the state o								
		(a)Current year	(b)Pnor year	b (c)Two years back	(d)Three years back	(e)Four years back			
1 a	Beginning of year balance	19,793,093	18,619,446	17,376,743	16,151,378	16,319,446			
L.	Cantulantana	330 250	000 451	83 755	608 602	690 796			

ra	beginning of year balance	19,793,093	10,019,440	17,370,743	10,131,370	10,319,44
b	Contributions	339,250	999,451	83,755	608,602	690,796
_	Not investment earnings, gains, and					•

c	Net investment earnings, gains, and losses	-562,142	1,707,155	2,239,300	1,238,505	-139,0
		245.405	206 552	200 001	205 700	1510

	losses	-562,142	1,707,155	2,239,300	1,238,505	-139,014
I	Grants or scholarships	245,185	286,553	269,061	306,709	164,073

1,179,000

67,406

 g End of year balance	18,164,302	19,793,093	18,619,446	
[

1,085,410

75,304

<u> </u>	Provide the estimated percentage of the cur	rent year end balance (line 1g, column (a)) held as
а	Board designated or quasi-endowment ▶	9 600 %

b	Permanent endowment 🕨	/8 000 %

c	Temporarily restricted endowment ▶	12 400 %	
---	------------------------------------	----------	--

Other expenditures for facilities

Administrative expenses

(i) unrelated organizations

and programs

organization by

(ii) related organizations																
If "Yes" on 3a(II), are the	rela	ted	org	anız	atio	ns	listed	las	red	quir	ed :	on S	Sche	edul	e Rī	>

Describe in Part XIII the intended uses of the organization's endowment funds

756,000

55,291

3a(i)

3a(ii)

Accumulated

Yes

264,422

50,611

17,376,743

512,819

42,958

16,151,378

No

Νo

Νo

(d)Book value

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property

Cost or other basis Cost or other basis (c)depreciation (investment) (other) **1a** Land . .

b Buildings . . 30,903 1,013

c Leasehold improvements 29,890 **d** Equipment . 448,315 294,941 153,374 Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 183,264

	(Form 990) 2015					Page
Part VII	Investments—Other Securities. Co	mplete if the or	ganızatıo	n answered 'Y	es' on For	m 990, Part IV, line 11b
	See Form 990, Part X, line 12. (a) Description of security or category		(b)	Book value	l (c)Method of valuation
	(including name of security)		(-7			end-of-year market value
	al derivatives					
	-held equity interests					
(3) 0 ther						
-						
					+	
					+	
					+	
	Investments—Program Related.	•				
Part VIII	Complete if the organization answered	d 'Yes' on Form	990. Part	: IV. line 11c.c	Saa Farm (200 Bart V line 13
	(a) Description of investment			Book value	l c	Method of valuation
	(a) Description of investment		(6)	DOOK VAILE		end-of-year market value
-						
Tabel (Calum	(h) south a such Same 2000, Part V, and (R) (ma. 12.)					
Part IX	onn (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization	on answered 'Ves'	on Form 9	On Part IV line		orm 000 Part V line 15
IGICIA	(a) Desc		011 1 011111 3	50,1 arc 1 v , mic	I I I d Sec I	(b) Book value
Total. (Colu	ımn (b) must equal Form 990, Part X, col (B) line	15) -			•	
Part X						ine 11e or 11f.
	See Form 990, Part X, line 25.				,	
1.	(a) Description of liability	(b) Book va	lue			
Federal inc	ome taxes					
_						

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.

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

Schedule D (Form 990) 2015

1

2

а

b

c d

3

а b

2

b

d

е

а b

c

3

Page 4

-844,664

4,559,976

4,559,976

Add lines **4a** and **4b** Total revenue Add lines 3 and 4c. (This must e Part XII Reconciliation of Expenses per Complete if the organization answer 1 Total expenses and losses per audited financi

Total revenue, gains, and other support per audited financial statements . . .

	Investment expenses not included on Form 990, Part VIII, line 7b .	L
	Other (Describe in Part XIII)	
	Add lines 4a and 4b	
	Total revenue Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line	ڊ
2	Reconciliation of Expenses per Audited Financial St Complete if the organization answered 'Yes' on Form 990,	
	Total expenses and losses per audited financial statements	
	A mounts included on line 1 but not on Form 990, Part IX, line 25	
	Donated services and use of facilities	
	Prior year adjustments	
	Other losses	
	Other (Describe in Part XIII)	
	Add lines 2a through 2d	
	Subtract line 2e from line 1	

A mounts included on line 1 but	not on Form 990, Part VIII, line 12		
Net unrealized gains (losses) o	n investments 2a -84	4,664	
Donated services and use of fa	cilities 2b		
Recoveries of prior year grants	2c		
Other (Describe in Part XIII)			
Add lines 2a through 2d		. 2e	-844
Subtract line ${f 2e}$ from line ${f 1}$.		3	4,559
A mounts included on Form 990), Part VIII, line 12, but not on line 1		
Investment expenses not inclu	ded on Form 990, Part VIII, line 7b . 4a		
Other (Describe in Part XIII)	4b		
Add lines 4a and 4b		4c	
Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	. 5	4,559
	penses per Audited Financial Statements With Expization answered 'Yes' on Form 990, Part IV, line 12a.	oenses per Ro	eturn.
Total expenses and losses per		. 1	4,020
A mounts included on line 1 but	not on Form 990, Part IX, line 25		
Donated services and use of fa	cilities 2a		
Prior year adjustments	2b		
Otherlosses	2c		
Other (Describe in Part XIII)			
Add lines 2a through 2d		2e	
Subtract line ${f 2e}$ from line ${f 1}$.		3	4,020
A mounts included on Form 990), Part IX, line 25, but not on line 1:		
Investment expenses not inclu	ided on Form 990, Part VIII, line 7b 4a		
Other (Describe in Part XIII)	4b		
Add lines 4a and 4b		4c	
Total expenses Add lines 3 an	d 4c. (This must equal Form 990, Part I, line 18)	5	4,020
XIII Supplemental Info	ormation		
	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1 lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this		any additional
Return Reference	Explanation	· · ·	

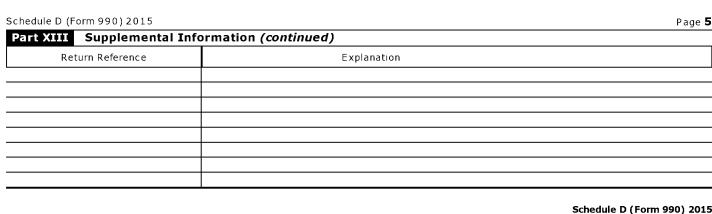
4,020,813 4,020,813 4,020,813

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and

information

Return Reference

Part V, Line 4 Endowment assets are used, consistent with donor restrictions, to provide a predictable stream of funding to programs operated or supported by the Foundation and for other grantmaking



efile GRAPHIC print - DO NO	T PROCESS	As Filed Da	ta -	DLN	: 93493315031006
SCHEDULE F Sta	atement of	Activities (Outside the Unit	ed States	OMB No 1545-0047
(1.5	► Complete	Part IV, line	n answered "Yes" to Form 14b, 15, or 16. o Form 990.	990,	2015
Department of the Treasury Internal Revenue Service ► Informa	tion about Schedu		o rorm 990. and its instructions is at w	ww.irs.gov/form990.	Open to Public Inspection
Name of the organization Women's Foundation of Minnesota				Employer ide 41-163576	entification number
Part I General Informati Complete if the orga			he United States. orm 990, Part IV, line	14b.	
For grantmakers. Does the and other assistance, the g used to award the grants or	rantees' eligibil			_	
2 For grantmakers. Describe assistance outside the Unit		ganızatıon's p	rocedures for monitor	ing the use of its gra	ants and other
3 Activites per Region (The follo	wing Part I, line	3 table can be d	uplicated if additional sp	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) in program service, describ specific type of service(s) in region	
(1) Central America and the Caribbean - Antigua & Barbuda Aruba, Bahamas,	0	0	grant	general operating	1,000
(2) Sub-Saharan Africa - Angola, Benin, Botswana, Burkina Faso	0	0	grant	general operating	11,250
(3) South Asia	0	0	grant	general operating	16,150
(4)					
(5)					
	0	C	1		28,400
b Total from continuation sheets to Part I					(
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, se	0		1	No 50082W Sch	28,400 edule F (Form 990) 2015

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	general operating	1,000	wire transfer			
(2)		Sub-Saharan Africa - Angola, Benin, Botswana, Burkina Faso,	general operating	11,250	wire transfer			
(3)		South Asia	general operating	16,150	wire transfer			
(4)								

Schedule F (Form 990) 2015

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

Part III	can	be
(a) Type of grant	or	
assistance		

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Sch	edule F (Form 990) 2015			Рa	ge 4
Pa	rt IV Foreign Forms				
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	√	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Г	Yes	✓	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Г	Yes	✓	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Г	Yes	√	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Г	Yes	√	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If				

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Yes

Schedule F (Form 990) 2015

Return Reference	Explanation			
Part I, Line 2	Prior to aw arding funds to an overseas grantee, the Women's Foundation of Minnesota requir es an international grantee representation form as part of the grant agreement letter, whi ch indicates the use for which the funds are intended and includes a clause that dictates funds to be returned if not used for their intended purpose			

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As Filed Data -

DLN: 93493315031006

OMB No 1545-0047

Supplemental Information Regarding SCHEDULE G Fundraising or Gaming Activities (Form 990 or 990-EZ)

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

Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 Name of the organization

Employer identification number Women's Foundation of Minnesota 41-1635761

	c tivities. Comple ers are not requir				on Form 990, Part IV	/, line 17.	
Indicate whether the orga	anızatıon raised fund	ds throug	h any of th	ne following activities C	heck all that apply		
a Mail solicitations				e Solicitation of r	on-government grants		
b Internet and email so	olicitations			f Solicitation of government grants			
c Phone solicitations	·						
d In-person solicitation	ns						
Did the organization have or key employees listed i services?						es No	
b If "Yes," list the ten high to be compensated at lea				users) pursuant to agree	ements under which the f	undrais er is	
(i) Name and address of individual or entity (fundraiser)	ındıvıdual		Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
otal	1	ı					
List all states in which the	organization is requ	stored or	liconcod t	to collect contributions	r has been petified it is	l avamnt from	

registration or licensing

If "Yes," explain _

Schedule G (Form 990 or 990-EZ) 2015 Page 2 Fundraising Events. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b)Event #2 (c)Other events (d) Total events The Stir (add col (a) through (event type) (event type) (total number) col (c)) 311,011 311,011 1 Gross receipts . 116,437 116,437 2 Less Contributions. 3 Gross income (line 1 minus line 2) 194,574 194,574 4 Cash prizes Noncash prizes 6 Rent/facility costs Expenses 7 Food and beverages 51,678 51,678 8 Entertainment Teg Teg 9 Other direct expenses 57,670 57,670 10 Direct expense summary Add lines 4 through 9 in column (d) 109,348 11 Net income summary Subtract line 10 from line 3, column (d) 85,226 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b)Pull tabs/Instant (d) Revenue (a)Bingo (c)Other gaming Total gaming (add col bingo/progressive bingo (a) through col (c)) 1 Gross revenue . Expenses 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes_____% ☐ Yes_____% Yes______% No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities Yes No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes No

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493315031006 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes." on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number Women's Foundation of Minnesota 41-1635761 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 56 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 41-1635761

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Name: Women's Foundation of Minnesota

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
180 Degrees Inc 236 Clifton Ave South Minneapolis, MN 55403	23-7153536	501(c)(3)	27,000		to Brittany's Place in honor of Richard Gardell's leadership
Ann Bancroft Foundation 211 N 1st St Ste 480 Minneapolis, MN 55401	41-1691868	501(c)(3)	7,500		General Operating
Annex Teen Clinic 5810 42nd Avenue N Robbinsdale, MN 55422	23-7236943	501(c)(3)	8,000		to support the clinic's health education presentations in classrooms and community settings to prevent unintended pregnancy in North

Minneapolis and Northwest Hennepin

County

(a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (g) Description of organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Augsburg College - MN Urban 41-0694721 501(c)(3) 18,500 General Operating Debate League 2211 Riverside Ave CB 216 Minneapolis, MN 55454 Bagosendaan 20-0990599 501(c)(3) 13,500 To build self-esteem 2476 230th Street and promote leadership Mahnomen, MN 56557 lamona Iow-income female youth ages 11 to 18 who have been

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

identified as at-risk or previous offenders CarıngBridge 42-1529394 501(c)(3) 10,000 General Operating

1715 Yankee Doodle Road Suite 301

Eagan, MN 55121

(a) Name and address of (b) EIN (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (a) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) do Esparanza 41 4114710 E01/61/21 10 000 Prenare voung Latinas

Casa de Esperanza	41-4114/10	501(C)(3)	18,000		Prepare young Latinas
PO Box 40115					to provide peer
St Paul, MN 55104					education strategies,
					lead community action
					projects, and social
					change activities

12,500

22,500

United State of Women

White House Listening

Summit

Session

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

501(c)(3)

Civic Nation

1415 Chapin St NW Apt 208

Washington, DC 20009

Dakota Wicohan

230 W 2nd Street

Morton, MN 56270

47-3576918

42-1552956

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Family Tree Clinic 23-7133742 501(c)(3) 8.000 To support serving at risk teens in Metro area 1619 Dayton Avenue Ste 205 bublic schools through St Paul, MN 55104 the School-Based Comprehensive Sex Education Program 28,500 Girl Scouts of Minnesota and 41-0693910 501(c)(3) lin honor of Linda Wisconsin River Valleys Keene's leadership and 400 Robert Street South lretirement Saint Paul, MN 55107 41-0706171 501(c)(3) 82,500 Goodwill-Easter Seals To support 120 low-Minnesota income women through 553 Fairview Avenue North la comprehensive, St Paul, MN 55104 integrated, and strengths-based model of short-term sector training in five higharowth industries. stackable credentials, and individualized job placement and retention services using a fullfamily approach that incorporates best bractices and customized wrap-

around support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Greater Minneapolis Council 41-0693933 501(c)(3) 8,000 To support the Live It! of Churches Teen Pregnancy 1001 E Lake Street PO Box Prevention Curriculum 7509 which provides Minneapolis, MN 554070509 facilitator trainings to the staff of reservation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Nurserv

4544 4th Avenue South Minneapolis, MN 55419 GroundSpark Inc

901 Mission Street Suite 205 San Francisco, CA 94103 83-0498854

					and urban youth-
					serving programs with
					holistic Indigenous-
					specific curriculum
Greater Minneapolis Crisis	41-1379021	501(c)(3)	100,000		General Operating

20,000

General Operating

organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Heartland Ranch Inc. 41-1723574 501(c)(3) 25,000 building a new home on 189 Highway 9 NE the Ranch property to Benson, MN 56215 serve sexually exploited youth 16,000 Hmong American Partnership 41-1667580 501(c)(3) provide girls with the 1075 Arcade Street opportunity to connect with a professional

(e) Amount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

careers that provide economy security

Saint Paul, MN 551063213 adult Hmong woman and develop a

(d) A mount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

mentor/mentee relationship including academic support, Jeremiah Program 41-1801834 501(c)(3) 75,000

internships and group and one-on-one mentoring to support work of Dr 1510 Laurel Avenue Ste 100 Josephine Reed Taylor Minneapolis, MN focusing on moving low 554031244 income women to

(b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant organization ıfapplıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Lake Superior School District 41-6001896 City of Two Harbors 15,000 Two Harbors High 381 School's all-girl 1640 Highway 2 200 Industrial technology Two Harbors, MN programming and 556164017 related expansions of the program Life House Inc. 47-1704840 501(c)(3) 25,000 expanding Intensive 102 W 1st Street Housing Program for Duluth, MN 55802 teens and young adults who have been sextrafficked by adding a 5 FTF Youth Mentor/Advocate 41-0872993 501(c)(3) 8,000 to support Seeing and Exploring Life's Future

(a) Description of

focused on youth of color in the Minneapolis Public Schools

Lutheran Social Service of Minnesota-St Paul 2485 Como Avenue (SELF), a pregnancy St Paul, MN 55108 prevention program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Men as Peacemakers 41-1841689 501(c)(3) 66,000 the Girls Restorative 205 West 2nd Street Suite 15 Program Duluth, MN 55802 41-1658654 501(c)(3) 48,000 General Operating Metropolitan Consortium of Community Developers 3137 Chicago Avenue Minneapolis, MN 55407 Minnesota African Women's 48-1259139 501(c)(3) 24,000 To support a teen Association (MAWA) pregnancy prevention program utilizing the 3300 County Road 109 Suite 510 Becoming A Brooklyn Center, MN 55401 Responsible Teen (BART) Curriculum, part of its African Girls Initiative for Leadership and Empowerment (AGILE) program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Minnesota Indian Women's 41-1500950 501(c)(3) 17,500 White House Listening Resource Center Session 2300 15th Avenue S Minneapolis, MN 55404 Minnesota Public Radio 41-0953924 501(c)(3) 52,000 52-week sponsorship 480 Cedar Street package on the St Paul, MN 551012230 Istatewide news network, and online, insteam spots New Horizons Crisis Center 41-1404769 501(c)(3) 13,500 for The Girls 109 5th Street S 40 Relationship Program, a Marshall, MN 56258 peer learning program aimed to give girls knowledge and tools and to have an outlet to address the issues they

face with mentors and

peers

(b) EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (a) Name and address of (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Northwest Technical College -20-1967120 501(c)(3) 30,000 Girls Who Code to Bemidii Foundation provide three tiers of 905 Grant Avenue SF training as computer Bemidji, MN 56601 programmers in to girls in grades 6-12 in the Bemidji region, including Red Lake, and Ponemah, the majority of whom are Native American 45-0507287 501(c)(3) 13,500 Empower and equip young women to have positive relationships

with self, others, and community through the Girls Lead program

General Operating

Peacemaker Resources 3124 Hannah Avenue Bemidii, MN 56601

7,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

1409 Willow Street Ste 305 Minneapolis, MN 55403

36-3567019

P Fund

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (e) Amount of non- (f) Method of valuation (c) IRC section (d) A mount of cash (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Pillsbury United Communities 41-0916478 501(c)(3) 16,000 White House Listening 414 South Eighth Street Session Sisterhood of Minneapolis, MN 55404 Traveling Scarf Planned Parenthood of 41-0948382 501(c)(3) 24,500 to the Tom Webber Minnesota- North Dakota-Advocacy Fund- in South Dakota celebration of Tom 671 Vandalia Street Weber St Paul, MN 55114 41-0794440 501(c)(3) 8,000 To support First Things First, an evidence based teen pregnancy prevention program for

Plymouth Christian Youth Center 2210 Oliver Avenue N Minneapolis, MN 55411 students attending PYC Arts and Technology

High School

(b) EIN (e) A mount of non- (f) Method of valuation (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Prepare and Prosper 23-7131829 501(c)(3) 82,500 lhelpina women increase 2610 University Ave W Suite their financial capability 450 land economic Saint Paul, MN 55114 opportunity, by providing free tax preparation, financial services and products. and financial coaching P+P will inform and lenrich these programs by activities geared to women, including financial forums, listening sessions, and

(a) Description of

Reaching Above and

Beyond) program

(d) A mount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

202 West Third St

Winona, MN 55987

peer learning sessions Pro-Choice Resources 41-0971333 501(c)(3) 56,200 General Operating 250 3rd Avenue N Ste 625 Minneapolis, MN 554011677 Project FINE 41-1883675 501(c)(3) 13,500 the GRAB (Girls

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance Regents of the University of 41-6007513 203,000 To develop a high-level Minnesota picture of the demand 221 University Ave SE Ste for victims of sex 100 trafficking in Minnesota Minneapolis, MN 55414 UROC will gather data through review, coding, and analysis of police records, combined with group and individual Interviews Resource Inc 41-0828779 501(c)(3) 82,500 the Specialized Career Services for Women 1900 Chicago Avenue program which provides Minneapolis, MN 55404 low income, low skilled women with culturallyfocused wage advancement, mentoring, credentialed

(e) A mount of non- (f) Method of valuation

(h) Purpose of grant

(g) Description of

training, and assetbuilding services Funding will 1) assist women to establish and

take action on longterm financial goals,

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(d) A mount of cash

(c) IRC section

(a) Name and address of

School

Minneapolis, MN 55419

(b) EIN

and (2) provide minigrants to assist women with training, education, credential, and workrelated expenses

41-1253375 501(c)(3) 19,335

General Operating Southside Family Charter 4500 Clinton Avenue S

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Advocates for Human 36-3292374 501(c)(3) 25,000 ongoing training and Rights consultation work to 330 Second Avenue S 800 lend trafficking of Minneapolis, MN 55401 Minnesota girls The Children's Theatre 41-1254553 501(c)(3) 50,000 to support a collaboration with Company 2400 Third Ave South Howard University for a Minneapolis, MN 55404 fellowship position The Family Partnership 41-0693858 501(c)(3) 71,000 To conduct intensive 414 South 8th Street committee staffing, Minneapolis, MN 554041081 testimony coordination, land one-to-one legislative meetings required to secure the lmaximum investment in

the FY 16/17 Health land Human Services budget for the Safe Harbor No Wrong Door

model

(b) EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) The Link 41-1920649 501(c)(3) 75,000 to contribute to down 1210 Glenwood Avenue payment on the building Minneapolis, MN 55405 currently being leased for Passageways Emergency Shelter and Housing Program E01/c1/21 The Links Foundation INC E2 1170020 11 000 to provide innovative ıng

(h) Purpose of grant

General Operating

THE LINKS FOUNDATION INC	52-11/0830] 501(c)(3)	11,000		to provide illiovative
1200 Massachusetts Avenue					and engaging
Washington, DC 20005					leaders hip
					development, college
					preparation curriculum,
					and mentoring to young
					A frican A merican
					women who are high-

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

41-6283068

(c) IRC section

(a) Name and address of

The Wallin Foundation

5200 Wilson Rd Edina, MN 55424

performing high school juniors and seniors

5,500

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) TrueChild 13-4087914 501(c)(3)51,000 continuing the second 760 Euclid Ave- Suite 202 phase of a project to Miami, FL 331390009 create a demandreduction social marketing and public education program, and expanding on formative

(e) A mount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

Distinction program

the Generation Next II

Building Young Women

of Excellence program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

(d) A mount of cash

(c) IRC section

					research, including message development, working with media partners, and conducting public messaging testing and
					creating evaluation metrics
We Win Institute	41-1820991	501(c)(3)	15,000		the Women of

13,500

3751 17th Ave S

Minneapolis, MN 55407

Marshall, MN 56258

Inc

Western Community Action

1400 South Saratoga Street

(a) Name and address of

(b) EIN

41-0888137

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) Women's Funding Network 41-1685134 501(c)(3) 10,000 event sponsorship 156 2nd Street 509 San Francisco, CA 94105 Women's Health Center of 41-1444270 501(c)(3) 15,000 General operating Duluth PA support Women's 32 F 1st St Ste 300 Health Center of Duluth

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

St Paul, MN 55104

Duluth, MN 55805 provides and advocates for confidential, affordable family planning and reproductive health care, respectful of

personal and cultural diversity

Women's Initiative for Self 41-1791358 501(c)(3) 14,000

for Girls Getting Ahead Leadership Networking

Empowerment 570 Asbury Street Ste 202 Luncheon

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) YMCA 41-0693932 501(c)(3) 21,000 Camp Widjiwagan 2125 East Henneping Avenue Minneapolis, MN 554132720 11,000 YouthCARE 41-1322470 501(c)(3) To provide young 2701 University Avenue SE women with a Ste 205 leadership and Minneapolis, MN 55414 employment experience allowing them to become positive role models for the younger girls living in their same low-income public

housing communities Little Earth of United Tribes in Minneapolis and McDonough Homes

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Mankato, MN 56001

ın St Paul

YWCA of Mankato 41-0711619 501(c)(3) 10,000 Surge

500 S Broad St

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) VMC A of Minneapolic 41-0603801 501(0)(3) 9 000 to cupport the 2016

T WCA of Millieapolis	41-0093691	201(c)(3)	6,000		to support the 2010
1130 Nicollet Mall					operations of Contact
Minneapolis, MN 55403					Plus, a program
					providing high-quality,
					comprehensive sexual
					health education and
					school connectedness
					support to youth in
					grades 6-12 ın
					Minneapolis Public

Schools YWCA of St Paul 41-0693892 501(c)(3) 50,000 general operating

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

375 Selby Avenue St Paul, MN 551021822

DLN: 93493315031006 Compensation Information OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2015 ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization Women's Foundation of Minnesota 41-1635761 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ✓ Compensation committee Written employment contract ✓ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Nο 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Νo Participate in, or receive payment from, an equity-based compensation arrangement? 40 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

5a

5b

6a

6b

7

8

Schedule J (Form 990) 2015

Cat No 50053T

Νo

Νo

Νo

Νo

Νo

compensation contingent on the revenues of

If "Yes," on line 5a or 5b, describe in Part III

compensation contingent on the net earnings of

If "Yes," on line 6a or 6b, describe in Part III

payments not described in lines 5 and 6? If "Yes," describe in Part III

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

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was

The organization?

The organization?

ın Part III

Any related organization?

Any related organization?

section 53 4958-6(c)?

Page 2

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	· '
		(ir)	(ui)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base	Bonus & incentive	` ` `	compensation			as deferred on prior
	(I) compensation	compensation	compensation				Form 990

14.766

2.550

248.088

9.830

(A)	Name and	Title

210.942

10.000

1 Lee Roper-Batker

President/CEO

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 Page 3 Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule J (Form 990) 2015

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE M Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule Department of the Treasury Internal Revenue Service Name of the organization Women's Foundation of Minnesota Types of Property

> (a) Check ١f applicable

1 Art—Works of art . . 2 Art—Historical treasures Art—Fractional interests Books and publications Clothing and household Cars and other vehicles

OMB No 1545-0047

2015

DLN: 93493315031006

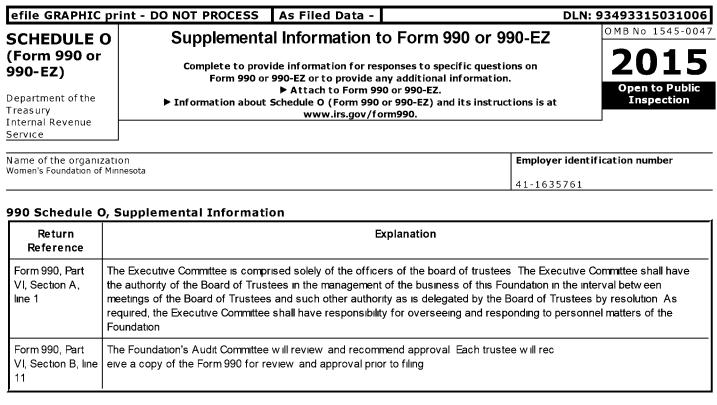
e M (Form 990) and its ins	tructions is at <u>www.irs.go</u>	ov/form990 Open to Pu Inspection
		Employer identification number
		41-1635761
	Т	T
(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amour
19	354,768	avg price day sold

7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded .	Х	19	354,768	avg price day sold
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation				

10	Securities—Closely held stock .		
11	Securities—Partnership, LLC, or trust interests		
12	Securities—Miscellaneous		
13	Qualified conservation contribution—Historic structures		
14	Qualified conservation contribution—Other		
15	Real estate—Residential .		
16	Real estate—Commercial		
17	Real estate—Other		
18	Collectibles		
19	Food inventory		
20	Drugs and medical supplies .		
21	Taxıdermy		
22	Historical artifacts		
23	Scientific specimens		
24	Archeological artifacts		
25	Othors (

	or trust interests									
12	Securities—Miscellaneous									
13	Qualified conservation contribution—Historic structures									
14	Qualified conservation contribution—Other									
15	Real estate—Residential .									
16	Real estate—Commercial									
17	Real estate—Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies .									
21	Taxıdermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ▶ ()									
26	Other ▶ ()									
27	Other ▶ ()									
28	Other ▶ ()									
29	Number of Forms 8283 received for which the organization comple					29				C
									Yes	No
30a	During the year, did the organiza	ition receiv	ve by contrib	ution any prope	rty reported in Pari	t I, lines 1 thre	ough 28, that			
	ıt must hold for at least three ye	ars from th	ne date of the	e initial contribi	tion, and which is r	not required to	be used			
	for exempt purposes for the entir	re holding į	period? .					30a) No
Ŀ	If "Yes," describe the arrangeme	ent in Part	II							
									'	i

10	Collectibles										
19	Food inventory										
20	Drugs and medical supplies .										
21	Taxidermy										
22	Historical artifacts										
23	Scientific specimens										
24	Archeological artifacts										
25	Other ► ()										
26	Other ▶ ()										
27	Other ▶ ()										
28	Other ▶ ()										
29	Number of Forms 8283 received for which the organization comple					;	29				0
										Yes	No
30a	 During the year, did the organization 	ition receiv	e by contribut	tion any prope	rty reported in Pa	rt I, lines	1 thro	ough 28, that			
	it must hold for at least three ye	ars from th	e date of the i	nıtıal contribu	tion, and which is	not requir	ed to	be used			
	for exempt purposes for the entire	re holdına ı	period?						30a	'	No
ŀ	If "Yes," describe the arrangeme								304		110
	· · · · · · · · · · · · · · · · · · ·				_				١		1
31	Does the organization have a gif	t acceptan	ce policy that	requires the r	eview of any non-	standard o	contri	butions?	31	Yes	
32 a	Does the organization hire or use	e third part	ies or related	organizations	to solicit, proces	s, or sell n	ionca	sh			
	contributions?								32a		No
	TENNA DE LA COMPANIA DE LA TI										



Return Explanation Reference All employees and trustees are required to review and sign the conflict of interest form annually. Except as permitted by law, Form 990. Part with respect to any contract or other transaction between the Foundation and any Trustee (or an organization in which a VI. Section B. Trustee is a Trustee, Officer, or legal representative or has a material financial interest), the material facts as to such line 12c contract or transaction and as to the Trustee's interest must be fully disclosed or known to the Board of Trustees prior to

990 Schedule O, Supplemental Information

	approval of such contract or transaction, and the interested Trustee may not be counted in determining the presence of a quorum and may not vote
Form 990, Part VI, Section B,	Compensation for all positions, including the CEO, is determined annually based on documen ted performance reviews and consistent with periodic comparability studies. During fiscal
line 15	year 2013, the Foundation retained an outside consultant to review the salary of each posi
	I tion compared with other nonprofit organizations and foundations of comparable size and pu

rpose Changes in CEO compensation are recommended by the Chair and Vice Chair, reviewed b y the Executive Committee and approved by the full Board

990 Schedule O, Supplemental Information

Return Reference Explanation

Form 990, Part VI, Section C, line | The Foundation makes its governing documents, conflict of interest policy and financial statements available

upon request

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493315031006 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) 2015 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Attach to Form 990. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Women's Foundation of Minnesota 41-1635761 Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (c) (f) (e) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (a) (c) (d) (e) (f) (g) Direct controlling Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2015

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990	, Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	G)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	ral or	Percentage
related organization		domicile		income(related,	total income	end-of-year	alloca	tions?	amount in box	mana	iging	ownership
		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)			Yes	No	1	Yes	No	
							100			1.05		
											\vdash	
					I	I						
	_											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entity	13) olled :y?
					l .		ı	Yes	No
(1) Chantable Remainder Trust (2)		MN	N/A	Т					No

Schedule R (Form 990) 2015				-	age 3
Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	990, Part IV, line	34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Ye	s No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more rel	lated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1	а	No
b Gıft, grant, or capital contribution to related organization(s)			1	b	No
${f c}$ Gıft, grant, or capital contribution from related organization(s)			1	.c	No
d Loans or loan guarantees to or for related organization(s)			1	d	No
e Loans or loan guarantees by related organization(s)				е	No
f Dividends from related organization(s)			1	.f	No
g Sale of assets to related organization(s)			1	g	No
h Purchase of assets from related organization(s)			• •	h	No
i Exchange of assets with related organization(s)			· ·	Li	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				.j	No
f k Lease of facilities, equipment, or other assets from related organization(s)				k	No
l Performance of services or membership or fundraising solicitations for related organization(s)			1	LI .	No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)			1	.m	No
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				Ln	No
o Sharing of paid employees with related organization(s)				0	No
p Reimbursement paid to related organization(s) for expenses			1	p	No
q Reimbursement paid by related organization(s) for expenses				q	No
r Other transfer of cash or property to related organization(s)			1	.r	No
s Other transfer of cash or property from related organization(s)				s Ye	s
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amour	nt involv	red

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

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

revenue) that was not a related organization. See instructions r			ertain invest	ment	partnerships		1						
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	ı	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											_		
											lula D /Fai	لِـــا	

