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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

MINNESOTA HIGH TECH ASSOCIATION EXISTS TO FUEL MINNESOTA'S PROSPERITY THROUGH INNOVATION AND TECHNOLOGY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	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	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	Yes
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	Yes
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	Yes
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		
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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	25	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
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.	13	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes
4a	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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
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 year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	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 licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	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 the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	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?		
15a	The organization's CEO, Executive Director, or top management official.	Yes	
15b	Other officers or key employees of the organization.		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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

17 List the States with which a copy of this Form 990 is required to be filed: _____

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

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶ LONNI RANALLO 400 SOUTH 4TH STREET SUITE 416 MINNEAPOLIS, MN 55415 (952) 230-4555

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

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	211,632	0	24,155

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Part VIII **Statement of Revenue**

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

Contributions, Gifts, Grants
and Other Similar Amounts

1a Federated campaigns . . .	1a	
b Membership dues . . .	1b	
c Fundraising events . . .	1c	
d Related organizations	1d	
e Government grants (contributions)	1e	
f All other contributions, gifts, grants, and similar amounts not included above	1f	
g Noncash contributions included in lines 1a-1f \$ _____		
h Total. Add lines 1a-1f ▶		

Program Service Revenue

	Business Code				
2a PROGRAM GRANT - SCITEC	900099	777,459	777,459		
b EVENTS AND PROGRAMS	900099	652,323	652,323		
c MEMBERSHIP DUES	900099	611,478	611,478		
d _____					
e _____					
f All other program service revenue					
g Total. Add lines 2a-2f ▶		2,041,260			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts) ▶		286			286
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties ▶					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss) ▶					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss) ▶					
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
b Less direct expenses b					
c Net income or (loss) from fundraising events . . . ▶					
9a Gross income from gaming activities See Part IV, line 19 a					
b Less direct expenses b					
c Net income or (loss) from gaming activities . . . ▶					
10a Gross sales of inventory, less returns and allowances . . . a					
b Less cost of goods sold . . . b					
c Net income or (loss) from sales of inventory . . . ▶					
Miscellaneous Revenue	Business Code				
11a MISCELLANEOUS	900099	7,990			7,990
b ADVERTISING	541800	5,850		5,850	
c _____					
d All other revenue					
e Total. Add lines 11a-11d ▶		13,840			
12 Total revenue. See Instructions ▶		2,055,386	2,041,260	5,850	8,276

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	505,635			
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, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	235,787			
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.	515,486			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	22,647			
9 Other employee benefits.	62,657			
10 Payroll taxes.	58,864			
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.	11,775			
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).	113,139			
12 Advertising and promotion.				
13 Office expenses.	49,161			
14 Information technology.				
15 Royalties.				
16 Occupancy.	55,035			
17 Travel.	16,589			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	362,260			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	39,851			
23 Insurance.	7,047			
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):				
a PUBLIC RELATIONS	58,873			
b EQUIPMENT RENTAL	6,141			
c DUES AND SUBSCRIPTIONS	4,698			
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	2,125,645			
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).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		16,652	1	20,160	
	2	Savings and temporary cash investments		691,314	2	525,514	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		58,855	4	77,812	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		32,848	9	28,284	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	240,040			
	b	Less: accumulated depreciation	10b	202,152	64,739	10c	37,888
	11	Investments—publicly traded securities			11		
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets		195,500	14	193,500	
	15	Other assets. See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 34)		1,059,908	16	883,158		
Liabilities	17	Accounts payable and accrued expenses		181,006	17	128,431	
	18	Grants payable			18		
	19	Deferred revenue		346,795	19	289,517	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.			21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties		8,947	23	3,395	
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		3,129	25	1,043	
	26	Total liabilities. Add lines 17 through 25		539,877	26	422,386	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets			520,031	27	460,772	
	28 Temporarily restricted net assets				28		
	29 Permanently restricted net assets				29		
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds				30		
	31 Paid-in or capital surplus, or land, building or equipment fund				31		
	32 Retained earnings, endowment, accumulated income, or other funds				32		
	33 Total net assets or fund balances			520,031	33	460,772	
	34 Total liabilities and net assets/fund balances			1,059,908	34	883,158	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,055,386
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,125,645
3	Revenue less expenses Subtract line 2 from line 1	3	-70,259
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	520,031
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	11,000
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	460,772

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:
Software Version:
EIN: 41-1440301
Name: MINNESOTA HIGH TECH ASSOCIATION

Form 990 (2016)

Form 990, Part III, Line 4a:

MHTA EXISTS TO FUEL MINNESOTA'S PROSPERITY THROUGH INNOVATION AND TECHNOLOGY THROUGH MHTA'S MEMBER COMPANIES, EACH YEAR IT CONNECTS THOUSANDS OF TECHNOLOGY PROFESSIONALS AND STUDENTS MAKING MEANINGFUL CONNECTIONS TO ADVANCE THEIR CAREERS THROUGH RESPECTED MHTA PROGRAMS AND AWARDS, EDUCATIONAL OPPORTUNITIES AND NETWORKING EVENTS MHTA IS DRIVING TO HELP MINNESOTA BECOME ONE OF THE COUNTRY'S TOP FIVE TECHNOLOGY STATES MHTA ALONG WITH MHTF ADMINISTER PROGRAMS THAT PROVIDE SCHOLARSHIPS, MENTORSHIP AND INTERNSHIP OPPORTUNITIES FOR SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) STUDENTS, AS WELL AS DRIVING MINNESOTA'S STEM WORKFORCE DEVELOPMENT

Form 990, Part III, Line 4b:

THE SCITECHSPERIENCE INTERNSHIP PROGRAM ASSISTS STUDENTS AND COMPANIES STUDYING OR WORKING IN KEY AREAS OF SCIENCE AND TECHNOLOGY,
ENGINEERING AND MATH RELATING TO KEY INDUSTRY FOCUS AREAS DURING 2015-2016, THE PROGRAM HAD THE FOLLOWING RESULTS -1153 STUDENT APPLICANTS-
230 COMPANY APPLICANTS-230 STUDENT INTERNS HIRED WITH 143 METRO PLACEMENTS AND 87 GREATER MINNESOTA PLACEMENTS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A)

(B)

(C)

(D)

(E)

(F)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARGARET ANDERSON KELLIHER PRESIDENT & CEO	40 00	X		X				211,632	0	24,155
LISA SCHLOSSER BOARD CHAIR	4 00	X		X				0	0	0
MICHAEL LACEY BOARD VICE CHAIR	2 00	X		X				0	0	0
ED FOPPE TREASURER	2 00	X		X				0	0	0
DOUG CARNIVAL SECRETARY	2 00	X		X				0	0	0
MIKE CONNLY BOARD MEMBER	2 00	X						0	0	0
JACQUELYN CROWHURST BOARD MEMBER	2 00	X						0	0	0
ROB DUCHSCHER BOARD MEMBER	2 00	X						0	0	0
JULIE DURHAM BOARD MEMBER	2 00	X						0	0	0
JILL FARRINGTON BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WIN GILES BOARD MEMBER	2 00	X						0	0	0
DAN GRIGSBY BOARD MEMBER	2 00	X						0	0	0
RANEL HAMM BOARD MEMBER	2 00	X						0	0	0
DAVE HARKNESS BOARD MEMBER	2 00	X						0	0	0
TONY HARRIS BOARD MEMBER	2 00	X						0	0	0
TODD HAUSCHILDT BOARD MEMBER	2 00	X						0	0	0
MILLA HAUTMAN BOARD MEMBER	2 00	X						0	0	0
JAY HEATH BOARD MEMBER	2 00	X						0	0	0
KAREN HUDSON BOARD MEMBER	2 00	X						0	0	0
PATRICK JOYCE BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HARLAN KRAGT BOARD MEMBER	2 00	X						0	0	0
JAKE KRINGS BOARD MEMBER	2 00	X						0	0	0
RICK KRUEGER BOARD MEMBER	2 00	X						0	0	0
MATT KUCHARSKI BOARD MEMBER	2 00	X						0	0	0
MATTHEW LAW BOARD MEMBER	2 00	X						0	0	0
SANDY LEE BOARD MEMBER	2 00	X						0	0	0
CHUCK LEFEBVRE BOARD MEMBER	2 00	X						0	0	0
MAC LEWIS BOARD MEMBER	2 00	X						0	0	0
JOY LINDSAY BOARD MEMBER	2 00	X						0	0	0
PAUL MATTIA BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BOB MESSNER BOARD MEMBER	2 00	X						0	0	0
TYLER MIDDLETON BOARD MEMBER	2 00	X						0	0	0
DAVID MINKKINEN BOARD MEMBER	2 00	X						0	0	0
CYRUS MORTON BOARD MEMBER	2 00	X						0	0	0
SAMUEL PRABHAKAR BOARD MEMBER	2 00	X						0	0	0
LIU QIAO BOARD MEMBER	2 00	X						0	0	0
JEAN QUAM BOARD MEMBER	2 00	X						0	0	0
CHRIS RENCE BOARD MEMBER	2 00	X						0	0	0
HASSAN RMAILE BOARD MEMBER	2 00	X						0	0	0
PAT RYAN BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SCOTT SINGER BOARD MEMBER	2 00	X						0	0	0
KIRSTEN STONE BOARD MEMBER	2 00	X						0	0	0
ROB TABB BOARD MEMBER	2 00	X						0	0	0
DEE THIBODEAU BOARD MEMBER	2 00	X						0	0	0
ASHISH VIMAL BOARD MEMBER	2 00	X						0	0	0
KEN VOSS BOARD MEMBER	2 00	X						0	0	0

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2016 Open to Public Inspection
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered "Yes" 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 MINNESOTA HIGH TECH ASSOCIATION	Employer identification number 41-1440301
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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	▶	\$ 0
3	Volunteer hours		0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	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
4a	Was a correction made?			☐ Yes ☐ No
b	If "Yes," describe in Part IV			

Part I-C 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	▶	\$	0
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶	\$	0
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶	\$	
4	Did the filing organization file Form 1120-POL for this year?			☐ Yes ☐ No
5	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) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ 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)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

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

d Other exempt purpose expenditures

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

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

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

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

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

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	611,478
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	46,232
b	Carryover from last year	2b	
c	Total	2c	46,232
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	73,707
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-27,475

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493221003137	
SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service		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. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.			OMB No 1545-0047 2016 Open to Public Inspection
Name of the organization MINNESOTA HIGH TECH ASSOCIATION				Employer identification number 41-1440301	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?				☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?				☐ Yes ☐ No
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year				
a	Total number of conservation easements	Held at the End of the Year			
b	Total acreage restricted by conservation easements	2a			
c	Number of conservation easements on a certified historic structure included in (a)	2b			
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c			
		2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►				
4	Number of states where property subject to conservation easement is located ►				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?				☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►				
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements				
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items				
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items				
(i) Revenue included on Form 990, Part VIII, line 1		► \$			
(ii) Assets included in Form 990, Part X		► \$			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items				
a	Revenue included on Form 990, Part VIII, line 1				► \$
b	Assets included in Form 990, Part X				► \$
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
			Cat No 52283D	Schedule D (Form 990) 2016	

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings			
c	Leasehold improvements	9,254	8,316	938
d	Equipment	54,781	40,510	14,271
e	Other	176,005	153,326	22,679
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			37,888

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED RENT	1,043
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,043

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 ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	2,121,141
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	65,755
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	65,755
3	Subtract line 2e from line 1	3	2,055,386
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	2,055,386

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	2,180,400
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	54,755
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	54,755
3	Subtract line 2e from line 1	3	2,125,645
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	2,125,645

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 41-1440301
Name: MINNESOTA HIGH TECH ASSOCIATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE ASSOCIATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION DESCRIBED IN SECTION 501(C)(6) AND IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE AS SUCH, IT IS EXEMPT FROM FEDERAL UNEMPLOYMENT TAXES AND STATE OF MINNESOTA SALES TAX, BUT IS SUBJECT TO FEDERAL AND STATE INCOME TAXES ON NET UNRELATED BUSINESS INCOME THE ASSOCIATION CURRENTLY HAS NO MATERIAL UNRELATED BUSINESS INCOME THE ASSOCIATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS THE ASSOCIATION FILES AS TAX-EXEMPT ORGANIZATIONS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493221003137

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
MINNESOTA HIGH TECH ASSOCIATION

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

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

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

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number
41-1440301

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2

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

0

3

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

44

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	MHTA ADMINISTERS SCITECHSPERIENCE, AN INTERNSHIP PROGRAM OF THE STATE OF MINNESOTA ACTING THROUGH THE MINNESOTA DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT (DEED) APPLICANTS FUNDED THROUGH THE SCITECHSPERIENCE INTERNSHIP PROGRAM WILL MEET AND ADHERE TO THE FOLLOWING REQUIREMENTS FOR SCITECHSPERIENCE TECHNOLOGY FOCUS AREAS THE SCITECHSPERIENCE INTERNSHIP PROGRAM ASSISTS STUDENTS AND COMPANIES STUDYING OR WORKING IN KEY AREAS OF SCIENCE AND TECHNOLOGY, ENGINEERING AND MATH RELATING TO THE FOLLOWING INDUSTRY FOCUS AREAS AEROSPACE AND DEFENSE, AGRICULTURE, FOOD SCIENCE, FORESTRY, BIOTECHNOLOGY AND LIFE SCIENCES, FUELS, ENERGY, ENERGY MANAGEMENT, INFORMATION TECHNOLOGY/COMPUTER TECHNOLOGY, MINING, MATERIALS, MANUFACTURING AND PROCESSING FURTHERMORE, THE DEED STATED FUNDING PREFERENCE WILL BE GIVEN TO COMPANIES INVOLVED WITHIN ONE OR MORE OF MINNESOTA'S KEY INDUSTRIES SHOULD THEY BE SELECTED FOR FUNDING, APPLICANTS ARE TO BE AWARE OF THE PREFERRED TECHNOLOGY FOCUS AREAS AND KEY MINNESOTA INDUSTRIES WHEN FUNDING SCITECHSPERIENCE INTERNSHIPS INTERNSHIPS INTERNSHIPS ARE CONSIDERED FOR AN UNDERGRADUATE JUNIOR OR SENIOR FROM A MINNESOTA FOUR-YEAR INSTITUTION OF HIGHER EDUCATION OR A SECOND-YEAR STUDENT AT A TWO-YEAR COMMUNITY OR TECHNICAL COLLEGE WORKING IN A PROFESSIONAL ENVIRONMENT ASSOCIATED WITH A DEFINED HIGH-TECH CATEGORY FOR A LIMITED PERIOD OF TIME INTERNSHIPS ARE NORMALLY ALIGNED WITH SCHOOL TERMS OR VACATION PERIODS, TO EITHER GAIN SUFFICIENT PRACTICAL HANDS-ON WORK EXPERIENCE IN A HIGH-TECH CATEGORY POSITION TO ALLOW FOR CAREER DECISION MAKING OR PROVIDE HOST EMPLOYERS WITH REAL-TIME STATE-OF-THE-ART CATEGORY SKILLS TO ACCELERATE THEIR SHORT-TERM BUSINESS OBJECTIVES TECHNOLOGY-BASED INTERNSHIPS FOR COLLEGE STUDENTS WORKING WITH A MINNESOTA COMPANY HAVING A PRINCIPAL PLACE OF BUSINESS IN MINNESOTA AND FEWER THAN 150 EMPLOYEES IN THE SEVEN COUNTY METRO AREA OR 250 IN GREATER MINNESOTA ARE TO BE SUPPORTED WITH SCITECHSPERIENCE FUNDS ELIGIBLE INTERNSHIPS MUST OFFER AT LEAST TEN WEEKS OF FULL-TIME EMPLOYMENT OR TWENTY WEEKS OF PART-TIME EMPLOYMENT DURING ANY CALENDAR YEAR A COMPANY MAY RECEIVE AN INTERNSHIP GRANT FOR ONE YEAR FOR AN INDIVIDUAL STUDENT ENROLLED IN A FOUR-YEAR DEGREE PROGRAM, OR A TWO-YEAR DEGREE AT A COMMUNITY OR TECHNICAL COLLEGE STUDENTS ELIGIBLE SCITECHSPERIENCE STUDENTS MUST BE MINNESOTA RESIDENTS OR A STUDENT IN A MINNESOTA INSTITUTION OF HIGHER EDUCATION IN GOOD ACADEMIC STANDING (2.5 GPA OR ABOVE) STUDENTS MUST ALSO BE CURRENTLY REGISTERED AS A SECOND-YEAR TECHNICAL OR COMMUNITY COLLEGE STUDENT, A JUNIOR OR SENIOR AT A FOUR-YEAR INSTITUTION IN A SCIENCE, MATH, ENGINEERING OR HIGH-TECH DEGREE HIGH-TECH CURRICULA INCLUDE ALL DEGREE PROGRAMS IN THE PHYSICAL, BIOLOGICAL, AND AGRICULTURAL SCIENCES AS WELL AS ENGINEERING, COMPUTER SCIENCE, AND MATHEMATICS STUDENTS MUST BE AT LEAST EIGHTEEN YEARS OF AGE WHEN THE INTERNSHIP BEGINS STUDENTS WHO ARE MINNESOTA RESIDENTS ATTENDING OUT-OF-STATE HIGHER EDUCATION INSTITUTIONS AND ENROLLED IN ELIGIBLE FIELDS OF STUDY MAY QUALIFY FOR THE SCITECHSPERIENCE INTERNSHIP PROGRAM ELIGIBLE COMPANIES COMPANIES ELIGIBLE TO PARTICIPATE IN THE SCITECHSPERIENCE INTERNSHIP PROGRAM MUST BE REGISTERED TO DO BUSINESS IN MINNESOTA AND HAVE A PRINCIPAL PLACE OF BUSINESS IN MINNESOTA AT WHICH A QUALIFYING INTERNSHIP WILL BE CONDUCTED COMPANIES MUST PROVIDE VALID HIGH-TECH GROWTH-ORIENTED INTERNSHIPS IN THE SCIENCE AND TECHNOLOGY FOCUS AREAS AS NOTED ABOVE COMPANIES SPONSORING ELIGIBLE INTERNSHIPS WILL BE PROVIDED UP TO \$2,500 FOR ONE YEAR FOR EACH ELIGIBLE INTERNSHIP, FULL- OR PART-TIME, OPPORTUNITY THE MAXIMUM NUMBER OF INTERNSHIPS PER COMPANY PER YEAR IS FIVE INTERNSHIP GRANT FUNDS MUST BE MATCHED WITH PRIVATE FUNDS ON A ONE-TO-ONE CASH BASIS, WHICH COULD EQUATE TO \$2,500 IN EARNINGS OVER THE ONE-YEAR FOR A STUDENT INTERN COMPANIES PARTICIPATING IN THE SCITECHSPERIENCE INTERNSHIP PROGRAM MAY USE ONE OR MORE THAN ONE INTERN TO FILL THE SAME POSITION OR PART-TIME INTERNSHIP ONLY UNDER THE FOLLOWING CIRCUMSTANCES AN INTERN LEAVES THE PROGRAM FOR ANY REASON AND IS REPLACED BY THE COMPANY WITH ANOTHER ELIGIBLE STUDENT OR AN INTERN FAILS TO MEET THE STANDARDS OUTLINE IN THE JOB DESCRIPTION AND/OR EMPLOYMENT AGREEMENT AND IS REPLACED BY THE BUSINESS WITH ANOTHER ELIGIBLE STUDENT DOCUMENTATION COMPANIES SUPPORTING INTERNSHIPS THROUGH THE SCITECHSPERIENCE INTERNSHIP PROGRAM WILL BE REQUIRED TO COMPLETE A REIMBURSEMENT FORM AND PROVIDE MHTA WITH APPROVED TIMECARDS/PAYROLL SUMMARIES AND INTERNSHIP STATUS WITH EACH REIMBURSEMENT REQUEST, FOLLOW-UP REPORTING AS REQUESTED BY DEED, AND RETAIN ACCURATE INTERN EMPLOYMENT RECORDS FOR A PERIOD OF THREE YEARS AFTER COMPLETION OF THE SCITECHSPERIENCE INTERNSHIP PROGRAM FUNDING FOR EACH INTERNSHIP SURVEY SCITECHSPERIENCE STUDENT INTERNS AND COMPANIES WILL BE REQUIRED AS A CONDITION OF THEIR FUNDING THE COMPLETION OF A SURVEY

Additional Data

Software ID:
Software Version:
EIN: 41-1440301
Name: MINNESOTA HIGH TECH ASSOCIATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN PRECISION AVIONICS 3815 PROSPERITY ROAD DULUTH, MN 55811	26-0224843	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
ANEZ CONSULTING INC 1700 TECHNOLOGY DR NE SUITE 130 WILLMAR, MN 56201	41-2009600	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHITECTURAL RESOURCES INC 704 EAST HOWARD STREET HIBBING, MN 55746	41-0988307	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
ASPEN RESEARCH CORPORATION 8401 JEFFERSON HWY MAPLE GROVE, MN 55369	41-1613020	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATIVA MEDICAL 1000 WESTGATE DRIVE SUITE 100 ST PAUL, MN 55114	26-3653862	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
ATOMIC LEARNING 15088 22ND AVE NE LITTLE FALLS, MN 56345	81-0959432	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUM CARDIOVASCULAR 1405 HERITAGE DRIVE SUITE 100 NORTHFIELD, MN 55057	27-4642245	N/A	6,216		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
BETULA EXTRACTIVES DBA THE ACTIVES FACTORY 1313 FAIRGROUND ROAD SUITE 150 TWO HARBORS, MN 55616	45-2116311	N/A	5,653		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMPARATIO USA LLC 5353 GAMBLE DRIVE SUITE 100 ST LOUIS PARK, MN 55416	20-5063533	N/A	5,900		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
CONVENTUS ORTHOPAEDICS INC 10200 73RD AVE N SUITE 122 MAPLE GROVE, MN 55369	80-0386869	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENERGY INSIGHT INC ENERGY INSIGHT INC 7935 STONE CREEK DR SUITE 140 CHANHASSEN, MN 55317	46-2076631	N/A	6,314		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
EXB SOLUTIONS 10201 WAYZATA BOULEVARD SUITE 100 HOPKINS, MN 55305	41-1983203	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARING COMPONENTS INC 615 HALE AVE NO OAKDALE, MN 55128	41-1669392	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
INVENSHURE 227 COLFAX AVE N SUITE 144 MINNEAPOLIS, MN 55405	90-0737396	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISTHMUS ENGINEERING INC 500 JACKSON ST ST PAUL, MN 55101	76-0717206	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
KIT MASTERS 825 1ST ST NE PERHAM, MN 56573	41-1839163	N/A	12,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LASX INDUSTRIES 4444 CENTERVILLE ROAD SUITE 170 WHITE BEAR LAKE, MN 55127	39-1924534	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
MICROBIOLOGICS 200 COOPER AVE NORTH ST CLOUD, MN 56303	41-0978292	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOBILE COMPOSER 5036 LUVERNE AVE MINNEAPOLIS, MN 55419	46-4822148	N/A	9,987		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
NANOCOPOEIA INC 1246 UNIVERSITY AVE W ST PAUL, MN 55104	41-2008223	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NET V PRO 3000 BOONE AVE S ST LOUIS PARK, MN 55426	27-3024218	N/A	10,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
NIMBELINK 3131 FERNBROOK LANE N SUITE 100 PLYMOUTH, MN 55447	46-2003402	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOVA-TECH ENGINEERING LLC 1705 ENGINEERING AVE NE WILLMAR, MN 56201	20-2845550	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
PACKET POWER 2716 SUMMER ST NE MINNEAPOLIS, MN 55413	26-1577078	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEQUOT TOOL & MFG INC PO BOX 580 PEQUOT LAKES, MN 56472	41-1410590	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
PLASTICERT INC 300 NORTH WILSON STREET LEWISTON, MN 55952	23-2158895	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRECISION GASKET COMPANY (PGC) 5732 LINCOLN DRIVE EDINA, MN 55436	41-1440143	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
PRODUCTIVITY QUALITY 15150 25TH AVE N PLYMOUTH, MN 55447	41-1709370	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUNCH THROUGH DESIGN LLC 201 6TH STREET SE SUITE 4 MINNEAPOLIS, MN 55414	27-0289633	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
RAILWAY EQUIPMENT COMPANY 15400 MEDINA RD PLYMOUTH, MN 55447	41-1371184	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBIOTIX INC 2660 PATTON RD ROSEVILLE, MN 55113	45-2888349	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
REVTRAK INC 9201 EAST BLOOMINGTON FREEWAY SUITE RR BLOOMINGTON, MN 55420	45-0479124	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RTVISION 115 2ND ST NE LITTLE FALLS, MN 56345	41-1945066	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
SATURN SYSTEMS INC 314 W SUPERIOR STREET STE 1015 DULUTH, MN 55802	41-1754350	N/A	7,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SENTERA 6636 CEDAR AVE S SUITE 250 RICHFIELD, MN 55423	47-2214696	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
SILK TECHNOLOGIES LTD 3700 ANNAPOLIS LANE NORTH SUITE 105 105 PLYMOUTH, MN 55447	46-4135846	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUMMIT ENVIROSOLUTIONS INC 1217 BANDANA BOULEVARD NORTH ST PAUL, MN 55108	41-1667349	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
SURMODICS 9924 WEST 74TH STREET EDEN PRAIRIE, MN 55344	41-1356149	N/A	11,273		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TONKA WATER 13305 WATERTOWER CIRCLE PLYMOUTH, MN 55441	41-1722116	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
UHL COMPANY 9065 ZACHARY LANE N MAPLE GROVE, MN 55369	41-0740957	N/A	6,421		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UMC INC 500 CHELSEA ROAD MONTICELLO, MN 55362	41-0970352	N/A	12,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
VECTOR WINDOWS 1020 INTERNATIONAL DRIVE FERGUS FALLS, MN 56537	20-0663490	N/A	5,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRTEVA 6110 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	20-0479750	N/A	10,000		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT
WIDSETH SMITH NOLTING & ASSOC INC 216 SOUTH MAIN CROOKSTON, MN 56716	41-1243629	N/A	12,500		N/A	N/A	SCITECHSPERIENCE INTERN WAGE SUPPORT

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.		OMB No 1545-0047
			2016
			Open to Public Inspection
Name of the organization MINNESOTA HIGH TECH ASSOCIATION		Employer identification number 41-1440301	

Part I Questions Regarding Compensation			Yes	No
1a 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 ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e.g., maid, chauffeur, chef)				
b 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	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?			2	
3 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 ☐ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee				
4 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: a Receive a severance payment or change-of-control payment?			4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?			5a	
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.			5b	
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?			6a	
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.			6b	
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.			7	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.			8	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			9	

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARGARET ANDERSON KELLIHER PRESIDENT & CEO	(i)	186,632	25,000	0	18,915	5,240	235,787	0
	(ii)	0	0	0	0	0	0	0

See Additional Data Table

[illegible]

Part III **Supplemental Information**

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

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization
MINNESOTA HIGH TECH ASSOCIATION

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .
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OMB No 1545-0047
2016
Open to Public Inspection

Employer identification number
41-1440301

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	EXECUTIVE COMMITTEE THE BOARD OF DIRECTORS SHALL ELECT AN EXECUTIVE COMMITTEE CONSISTING OF THE CHAIR OF THE BOARD, VICE CHAIR OF THE BOARD, SECRETARY, TREASURER AND NOT LESS THAN THREE OTHER DIRECTORS THE CHAIR OF THE BOARD SHALL SERVE AS THE CHAIR OF THE EXECUTIVE COMMITTEE THE IMMEDIATE PAST CHAIR AND THE PRESIDENT SHALL BE EX-OFFICIO MEMBERS THE GOVERNANCE COMMITTEE SHALL MAKE AND REPORT THE NOMINATIONS OF ITS NOMINATING SUBCOMMITTEE FOR MEMBERS OF THE EXECUTIVE COMMITTEE AT THE FIRST MEETING OF THE BOARD FOLLOWING THE ANNUAL MEETING THE EXECUTIVE COMMITTEE SHALL HAVE AND EXERCISE THE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS OF THE CORPORATION ANY SUCH EXECUTIVE COMMITTEE SHALL ACT ONLY IN THE INTERVAL BETWEEN MEETINGS OF THE BOARD, AND SHALL BE SUBJECT AT ALL TIMES TO THE CONTROL AND DIRECTION OF THE BOARD THE EXECUTIVE COMMITTEE SHALL, BY MAJORITY VOTE, APPOINT THE CHAIRS OF ALL COMMITTEES OF THE BOARD EXCEPT ITSELF, WITH THE INPUT AND RECOMMENDATIONS OF THE PRESIDENT SUCH COMMITTEE MAY MEET AT STATED TIMES OR ON NOTICE TO ALL GIVEN BY ANY OF THEIR OWN NUMBER VACANCIES IN THE MEMBERSHIP OF THE EXECUTIVE COMMITTEE MAY BE FILLED BY THE BOARD OF DIRECTORS AT A REGULAR MEETING OR AT A SPECIAL MEETING CALLED FOR THAT PURPOSE GOVERNANCE COMMITTEE THE GOVERNANCE COMMITTEE SHALL BE A STANDING COMMITTEE OF THE BOARD AND BE COMPRISED OF MEMBERS OF THE BOARD WHO ARE ELECTED BY THE BOARD TO SERVE THEREON THE GOVERNANCE COMMITTEE SHALL FROM TIME TO TIME MAKE RECOMMENDATIONS TO THE BOARD WITH SUGGESTIONS IT MAY HAVE ON THE EFFICIENT AND EFFECTIVE GOVERNANCE OF THE CORPORATION THE GOVERNANCE COMMITTEE SHALL HAVE A SUBCOMMITTEE OF IT ENTITLED THE NOMINATING SUBCOMMITTEE THE NOMINATING SUBCOMMITTEE SHALL BE COMPRISED OF THE MEMBERS OF THE GOVERNANCE COMMITTEE AND THE THEN CURRENT OFFICERS OF THE CORPORATION THE NOMINATING SUBCOMMITTEE SHALL PROPOSE TO THE GOVERNANCE COMMITTEE AND THROUGH THE GOVERNANCE COMMITTEE TO BOARD NOMINEES FOR OFFICERS, DIRECTORS OF THE CORPORATION, AND MEMBERS OF THE EXECUTIVE COMMITTEE IN ACCORDANCE WITH SECTIONS 3 3, 4 2, AND 5 1 OF THE BYLAWS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION HAS FOUR CLASSES OF MEMBERS GENERAL MEMBERS HIGH TECHNOLOGY PRODUCTS AND SERVICE CREATORS (CORE BUSINESSES INCLUDE SOFTWARE, TELECOMMUNICATIONS, COMPUTER SEMICONDUCTORS/COMPONENTS, MEDICAL EQUIPMENT, MANUFACTURING/FACTORY, INSTRUMENTATION, AND AEROSPACE/DEFENSE) TECHNOLOGY APPLICATION USERS SALES AND SERVICE ORGANIZATIONS (CORE BUSINESSES INCLUDE FINANCIAL INSTITUTIONS, UTILITIES, SALES AND SERVICE ORGANIZATIONS, AGRICULTURAL PROCESSORS) ASSOCIATE/PROFESSIONAL SERVICES MEMBERS ANCILLARY SUPPORT SERVICES (CORE BUSINESSES INCLUDE ACCOUNTING, LEGAL, AND OTHER PROFESSIONAL ADVISING ENTITIES) TECHNOLOGY NON-PROFIT MEMBERS EDUCATION INSTITUTIONS, PUBLIC BROADCASTERS, PUBLIC ENTITIES AND AGENCIES, AND OTHER TECHNOLOGY-BASED ORGANIZATIONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS REVIEWED IN FOUR STEPS PRIOR TO FILING WITH THE IRS (1) REVIEW AND APPROVAL OF THE AUDIT BY THE TREASURER (2) REVIEW AND APPROVAL OF THE AUDIT BY THE FULL EXECUTIVE COMMITTEE (3) REVIEW AND APPROVAL OF THE FORM 990 BY THE FULL EXECUTIVE COMMITTEE (4) REVIEW OF THE FORM 990 BY THE FULL BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	A CONFLICT OF INTEREST QUESTIONNAIRE IS GIVEN TO THE BOARD ANNUALLY AND BOARD MEMBERS DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST THAT MAY ARISE DURING THE YEAR TO THE BOARD CHAIR OR GOVERNANCE COMMITTEE CONFLICT DETERMINATIONS AND RESTRICTIONS ON INTERESTED INDIVIDUALS ARE MADE ON A CASE-BY-CASE BASIS WITH ALL PROCEEDINGS RELATED TO POTENTIAL AND ACTUAL CONFLICTS DOCUMENTED IN THE MEETING MINUTES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD CHAIR REVIEWS AND APPROVES CHANGES TO THE PRESIDENT/CEO SALARY AND SUBSTANTIATION OF THE PROCESS CONDUCTED BY A COMPENSATION COMMITTEE IS SIGNED BY BOTH THE BOARD CHAIR AND THE PRESIDENT/CEO AND RETAINED BY THE ORGANIZATION THIS PROCESS WAS MOST RECENTLY UNDERTAKEN IN 2016 FOR THE PRESIDENT/CEO, M ANDERSON KELLIHER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST