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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ECUMEN		D Employer identification number 91-1982139	
	Doing business as		E Telephone number 651-766-4300	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3530 LEXINGTON AVENUE NORTH		G Gross receipts \$ 164,876,300.	
	City or town, state or province, country, and ZIP or foreign postal code SHOREVIEW, MN 55126		H(a) Is this a group return for subordinates? STMT 1 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	F Name and address of principal officer: KATHRYN ROBERTS SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)	

I Tax-exempt status: 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.ECUMEN.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1923** **M** State of legal domicile: **MN**

H(c) Group exemption number ▶ **9386**

Part I Summary

1 Briefly describe the organization's mission or most significant activities. WE CREATE HOMES FOR OLDER ADULTS, WHEREVER THEY CHOOSE TO LIVE.	
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3 Number of voting members of the governing body (Part VI, line 1a)	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	13
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	3832
6 Total number of volunteers (estimate if necessary)	1500
7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, line 34	0.
8 Contributions and grants (Part VIII, line 1h)	3,605,371.
9 Program service revenue (Part VIII, line 2g)	143,553,103.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,915,889.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,585,710.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	152,660,073.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	87,995.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	79,881,643.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 594,087.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	70,173,940.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	150,143,578.
19 Revenue less expenses. Subtract line 18 from line 12	2,516,495.
20 Total assets (Part X, line 16)	324,833,912.
21 Total liabilities (Part X, line 26)	285,133,873.
22 Net assets or fund balances. Subtract line 21 from line 20	39,700,039.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	3,605,371.	3,075,114.
9 Program service revenue (Part VIII, line 2g)	143,553,103.	153,698,817.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,915,889.	1,461,422.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,585,710.	677,247.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	152,660,073.	158,912,600.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	87,995.	293,679.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	79,881,643.	89,273,403.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 594,087.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	70,173,940.	69,239,189.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	150,143,578.	158,806,271.
19 Revenue less expenses. Subtract line 18 from line 12	2,516,495.	106,329.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	324,833,912.	319,012,236.
21 Total liabilities (Part X, line 26)	285,133,873.	277,966,043.
22 Net assets or fund balances. Subtract line 21 from line 20	39,700,039.	41,046,193.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 	Date 10/24/17
	SCOTT MCGUIRE, CFO & SENIOR VICE PRESIDENT Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name CHRISTOPHER STEINHOFF	Preparer's signature 	Date 10/24/17	Check if self-employed <input type="checkbox"/>	PTIN P01587351
	Firm's name ▶ CLIFTONLARSONALLEN LLP	Firm's EIN ▶ 41-0746749	Phone no. 612-376-4500		
	Firm's address ▶ 220 SOUTH SIXTH STREET, SUITE 300 MINNEAPOLIS, MN 55402				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

SCANNED
Expenses
Net Assets or Fund Balances
2/11/17 Activities & Governance

RECEIVED
OCT 30 2017
GREEN UT
IRS

gta KA

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: WE CREATE HOMES FOR OLDER ADULTS, WHEREVER THEY CHOOSE TO LIVE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] 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? [X] 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 \$ 140,559,588. including grants of \$ 293,679.) (Revenue \$ 153,698,817.) ECUMEN IS A MINNESOTA NONPROFIT CORPORATION ORGANIZED PRIMARILY TO OWN, OPERATE, MANAGE AND SUPPORT SENIOR LIVING AND HEALTH CARE COMMUNITIES. HOUSING AND SERVICES FOR SENIORS ARE PROVIDED AT ECUMEN COMMUNITIES THROUGH A CONTINUUM OF CARE, INCLUDING VARIOUS LEVELS OF RESIDENTIAL LIVING AND SKILLED NURSING AS WELL AS OTHER COMMUNITY-BASED PROGRAMS AND SERVICES, INCLUDING HOME HEALTH CARE AND OUTPATIENT THERAPIES. AS OF DECEMBER 31, 2016, ECUMEN AND ITS AFFILIATES OWNED OR LEASED 46 HEALTH CARE AND OTHER FACILITIES, INCLUDING 10 U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT SUBSIDIZED HOUSING PROJECTS. AN ADDITIONAL 20 HEALTH CARE AND OTHER FACILITIES WERE MANAGED FOR UNRELATED THIRD-PARTY OWNERS.

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

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 140,559,588.

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

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>		X
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>		X
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>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
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>	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
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?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
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>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
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>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
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>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
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>	X	
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>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
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>	X	
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>		X
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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	
Note. All Form 990 filers are required to complete Schedule O		

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance requirements.

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

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

Section A. Governing Body and Management

Table with columns for line numbers, descriptions, and Yes/No checkboxes. Includes lines 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with columns for line numbers, descriptions, and Yes/No checkboxes. Includes lines 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MN
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
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. SCOTT MCGUIRE - (651)766-4300
3530 LEXINGTON AVENUE NORTH, SHOREVIEW, MN 55126

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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			
(1) ROBERT HOFFMAN CHAIR	1.00	X		X				0.	0.	0.
(2) GAIL OLSON VICE CHAIR	1.00	X		X				0.	0.	0.
(3) DEBRA CERVENKA SECRETARY	1.00	X		X				0.	0.	0.
(4) DARRELL TUKUA TREASURER	1.00	X		X				0.	0.	0.
(5) ANN BARKELEW TRUSTEE	1.00	X						0.	0.	0.
(6) ROBERTA CORDANO TRUSTEE THRU MAY 2016	1.00	X						0.	0.	0.
(7) SUSIE CROCKETT TRUSTEE	1.00	X						0.	0.	0.
(8) J. MICHAEL DADY TRUSTEE	1.00	X						0.	0.	0.
(9) DAVID DURENBERGER TRUSTEE	1.00	X						0.	0.	0.
(10) LISA KRO TRUSTEE	1.00	X						0.	0.	0.
(11) NANCY THOMPSON ULVESTAD TRUSTEE	1.00	X						0.	0.	0.
(12) RICHARD OLSON TRUSTEE	1.00	X						0.	0.	0.
(13) JOHN PETRABORG TRUSTEE	1.00	X						0.	0.	0.
(14) JIM SCHOWALTER TRUSTEE	1.00	X						0.	0.	0.
(15) DENNIS JOHNSON CFO & SENIOR VP THRU DEC 2016	39.00 1.00			X				352,067.	0.	99,166.
(16) KATHRYN ROBERTS PRESIDENT & CEO	39.00 1.00			X				495,562.	0.	146,926.
(17) SCOTT MCGUIRE CFO & SENIOR VP	39.00 1.00			X				40,769.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(18) ROBIN BALCK SR VP HR & STRATEGIC ALIGNMENT	40.00			X				239,798.	0.	71,529.
(19) JULIE MURRAY SR VP OF MARKETING & DEVELOPMENT	40.00			X				222,942.	0.	46,564.
(20) SHELLEY KENDRICK SR VP & COO	39.00 1.00			X				246,123.	0.	82,801.
(21) LARRY JORGENSEN VP OF INFORMATION TECHNOLOGY	40.00				X			182,165.	0.	32,879.
(22) JOHN KORZENDORFER SENIOR DIRECTOR OF CAMPUS OPERATIONS	40.00					X		150,865.	0.	46,946.
(23) CYNTHIA MOWAN VP OF FINANCE	39.00 1.00					X		149,766.	0.	36,251.
(24) CAROL KVIDT REGIONAL DIRECTOR OF OPERATIONS	40.00					X		157,837.	0.	39,509.
(25) SHAWNA JOKINEN DIRECTOR OF OPERATIONS - HOME CARE &	40.00					X		157,978.	0.	26,206.
(26) PAUL LIBBON REGIONAL DIRECTOR	40.00					X		163,556.	0.	28,412.
1b Sub-total								2,559,428.	0.	657,189.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,559,428.	0.	657,189.

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 **30**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
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? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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) Name and business address	(B) Description of services	(C) Compensation
GRAY PLANT MOOTY & BENNETT 80 S 8TH ST, STE 500, MINNEAPOLIS, MN 55402	LEGAL	401,755.
CLIFTONLARSONALLEN, LLP, 220 S 6TH ST, STE 300, MINNEAPOLIS, MN 55402	AUDIT & TAX	383,440.
LINCOLN WASTE, 2075 SILAS DEAN HWY STE 101, ROCKY HILL, CT 06067	TRASH COLLECTION	266,622.
ENTERPRISE FM TRUST PO BOX 800089, KANSAS CITY, MO 64180	AUTO FLEET MGMT	115,498.
WELSHCO HOLDCO LLC, 4350 BAKER ROAD STE 400, MINNETONKA, MN 55343	REAL ESTATE	100,870.

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 **5**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	25,498.				
	b Membership dues	1b					
	c Fundraising events	1c	113,802.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,104,330.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,831,484.				
	g Noncash contributions included in lines 1a-1f \$		3,078.				
	h Total. Add lines 1a-1f		3,075,114.				
	Program Service Revenue	Business Code					
2 a NURSING REVENUE		623000	76,418,634.	76,418,634.			
b ASSISTED LIVING FEES		623000	72,883,436.	72,883,436.			
c MANAGEMENT FEES		541610	2,512,345.	2,512,345.			
d MEAL FEES		722210	672,833.	672,833.			
e OTHER OPERATING FEES		623000	643,135.	643,135.			
f All other program service revenue		623000	568,434.	568,434.			
g Total. Add lines 2a-2f			153,698,817.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		757,549.			757,549.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	149,203.				
		(ii) Personal	0.				
		b Less: rental expenses	0.				
		c Rental income or (loss)	149,203.				
	d Net rental income or (loss)		149,203.			149,203.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1,039,547.				
		(ii) Other	5,519,200.				
		b Less: cost or other basis and sales expenses	917,372.	4,937,502.			
		c Gain or (loss)	122,175.	581,698.			
	d Net gain or (loss)		703,873.			703,873.	
	8 a Gross income from fundraising events (not including \$ 113,802. of contributions reported on line 1c) See Part IV, line 18	a	33,793.				
		b Less: direct expenses	46,991.				
c Net income or (loss) from fundraising events			-13,198.			-13,198.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	68,367.					
	b Less: cost of goods sold	61,835.					
	c Net income or (loss) from sales of inventory		6,532.			6,532.	
Miscellaneous Revenue		Business Code					
11 a CAFE/CATERING REVENUES	722320	346,323.			346,323.		
b TENANT FEES	623000	322,117.			322,117.		
c FACILITY USE FEES	713940	200,641.			200,641.		
d All other revenue	900099	-334,371.			-334,371.		
e Total. Add lines 11a-11d		534,710.					
12 Total revenue. See instructions.		158,912,600.	153,698,817.	0.	2,138,669.		

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	293,679.	293,679.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,218,522.	221,853.	1,996,669.	
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	69,918,562.	61,781,259.	7,750,456.	386,847.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,695,117.	1,657,185.	13,735.	24,197.
9 Other employee benefits	10,115,819.	9,253,980.	831,463.	30,376.
10 Payroll taxes	5,325,383.	4,862,242.	432,345.	30,796.
11 Fees for services (non-employees):				
a Management	6,172,653.	6,172,653.		
b Legal	131,717.	89,053.	42,664.	
c Accounting	178,632.	17,863.	160,769.	
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 Sch O.)	13,291,863.	12,426,110.	817,979.	47,774.
12 Advertising and promotion	946,002.	798,182.	147,373.	447.
13 Office expenses	1,220,740.	951,030.	260,996.	8,714.
14 Information technology	708,530.	406,895.	289,456.	12,179.
15 Royalties				
16 Occupancy	7,488,998.	6,622,571.	866,427.	
17 Travel	1,333,700.	979,750.	345,934.	8,016.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,244,335.	1,026,054.	184,405.	33,876.
20 Interest	8,953,495.	7,943,809.	1,009,686.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,783,661.	10,190,530.	1,593,131.	
23 Insurance	1,021,398.	819,863.	201,535.	
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 RESIDENT CARE SUPPLIES	9,267,372.	9,267,372.		
b EQUIP. RENTAL & MAINT.	2,027,362.	1,673,346.	353,343.	673.
c SURCHARGE	1,611,420.	1,611,420.		
d BAD DEBT EXPENSE	825,494.	541,267.	279,900.	4,327.
e All other expenses	1,031,817.	951,622.	74,330.	5,865.
25 Total functional expenses. Add lines 1 through 24e	158,806,271.	140,559,588.	17,652,596.	594,087.
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 Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	10,755,779.	1	14,485,930.
	2	Savings and temporary cash investments	1,351,971.	2	1,254,755.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	11,930,750.	4	14,015,723.
	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 instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	646,667.	7	174,522.
	8	Inventories for sale or use	18,268.	8	
	9	Prepaid expenses and deferred charges	664,597.	9	659,100.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 344,279,780.		
	b	Less: accumulated depreciation	10b 113,453,686.	10c	230,826,094.
	11	Investments - publicly traded securities	27,378,086.	11	29,372,440.
	12	Investments - other securities See Part IV, line 11	2,422,748.	12	2,450,462.
	13	Investments - program-related See Part IV, line 11	649,110.	13	649,095.
	14	Intangible assets	6,307,336.	14	5,824,664.
	15	Other assets. See Part IV, line 11	46,561,309.	15	19,299,451.
16	Total assets. Add lines 1 through 15 (must equal line 34)	324,833,912.	16	319,012,236.	
Liabilities	17	Accounts payable and accrued expenses	13,242,029.	17	16,040,287.
	18	Grants payable		18	
	19	Deferred revenue	195,585.	19	-141,227.
	20	Tax-exempt bond liabilities	100,270,868.	20	97,081,597.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	2,153,852.	21	2,906,845.
	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	166,955,705.	23	159,522,984.
	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	2,315,834.	25	2,555,557.
	26	Total liabilities. Add lines 17 through 25	285,133,873.	26	277,966,043.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	34,135,495.	27	35,354,634.
	28	Temporarily restricted net assets	2,153,001.	28	2,203,503.
	29	Permanently restricted net assets	3,411,543.	29	3,488,056.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	39,700,039.	33	41,046,193.	
34	Total liabilities and net assets/fund balances	324,833,912.	34	319,012,236.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	158,912,600.
2	Total expenses (must equal Part IX, column (A), line 25)	2	158,806,271.
3	Revenue less expenses. Subtract line 2 from line 1	3	106,329.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	39,700,039.
5	Net unrealized gains (losses) on investments	5	1,199,607.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	40,218.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	41,046,193.

Part XII Financial Statements and Reporting

Check 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	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. <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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.	X	
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?		X
3b	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		

Form 990 (2016)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2015 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,387,462.	5,659,867.	3,935,527.	3,605,371.	3,075,114.	18,663,341.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	142,022,061.	138,900,293.	138,286,180.	143,553,103.	153,698,817.	716,460,454.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	144,409,523.	144,560,160.	142,221,707.	147,158,474.	156,773,931.	735,123,795.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons				131,190.	111,011.	242,201.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b				131,190.	111,011.	242,201.
8 Public support. (Subtract line 7c from line 6)						734,881,594.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6	144,409,523.	144,560,160.	142,221,707.	147,158,474.	156,773,931.	735,123,795.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,019,793.	728,737.	715,674.	845,436.	906,752.	4,216,392.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,019,793.	728,737.	715,674.	845,436.	906,752.	4,216,392.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,067,745.	1,172,940.	1,290,627.	1,522,610.	636,870.	5,690,792.
13 Total support. (Add lines 9, 10c, 11, and 12)	146,497,061.	146,461,837.	144,228,008.	149,526,520.	158,317,553.	745,030,979.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	98.64 %
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	98.68 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	.57 %
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	.56 %

- 19a 33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7.			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

SPECIAL EVENT REVENUES

FACILITY USE FEES

MISCELLANEOUS INCOME

CAFE/CATERING REVENUES

SALES OF INVENTORY

TENANT FEES

LAUNDRY REVENUE

MAINTENANCE/REPAIRS INCOME

HOUSEKEEPING

BEAUTY SHOP

DEBT REFINANCING LOSS

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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 organization ECUMEN	Employer identification number 91-1982139
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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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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 ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization 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-

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.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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.		
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		0.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		0.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		
j Total. Add lines 1c through 1i			0.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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	
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	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
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	

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

PART II-B, LINE 1, LOBBYING ACTIVITIES

ECUMEN PAID \$132,141 FOR MEMBERSHIP DUES TO AGING SERVICES OF MINNESOTA AND LEADINGAGE. THESE AGENCIES ARE INVOLVED IN AGING SERVICES ISSUES RELATED TO LONG TERM CARE, SENIOR HOUSING AND SUPPORTIVE SERVICES THROUGH GRASSROOTS ADVOCACY AND EDUCATION. THESE ASSOCIATIONS DO CONDUCT LOBBYING ACTIVITIES ON BEHALF OF THEIR MEMBERS. THE DUES AMOUNTS SHOWN ARE THE

Part IV Supplemental Information (continued)

TOTAL DUES PAID TO THE RESPECTIVE ASSOCIATIONS, BUT THE PERCENTAGE OF THE DUES ATTRIBUTABLE TO LOBBYING ACTIVITIES HAS NOT BE PROVIDED TO ECUMEN.

Lined area for supplemental information.

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.

OMB No 1545-0047

2016

Open to Public Inspection

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

Name of the organization **ECUMEN** Employer identification number **91-1982139**

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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 a 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.

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

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

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:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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 on 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	5,568,271.	5,517,731.	7,463,660.	4,034,189.	4,242,534.
b Contributions	1,857,857.	1,333,259.	1,578,164.	3,441,957.	453,360.
c Net investment earnings, gains, and losses	27,715.	-305,205.	-52,676.	206,028.	133,602.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,762,283.	977,515.	3,471,417.	218,514.	795,307.
f Administrative expenses					
g End of year balance	5,691,560.	5,568,271.	5,517,731.	7,463,660.	4,034,189.

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

- a Board designated or quasi-endowment .00 %
- b Permanent endowment 61.00 %
- c Temporarily restricted endowment 39.00 %

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:

	Yes	No
(i) unrelated organizations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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		15,658,434.		15,658,434.
b Buildings		298,932,536.	93,316,657.	205,615,879.
c Leasehold improvements				
d Equipment		28,940,714.	20,137,029.	8,803,685.
e Other		748,096.		748,096.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 230,826,094.

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. (Col. (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. (Col. (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) TENANT SECURITY DEPOSITS	2,998,017.
(2) BOND & MORTGAGE INDENTURE AGREEMENTS	13,353,805.
(3) WORKERS COMPENSATION RESERVE	2,098,923.
(4) OTHER	598,815.
(5) LETTER OF CREDIT COLLATERAL	249,891.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 19,299,451.	

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	
(2) ASSET RETIREMENT OBLIGATIONS	173,414.
(3) INSURANCE CLAIMS RESERVES	2,382,143.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 2,555,557.	

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	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	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
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
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

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	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
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
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

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

PART IV, LINE 2B:

ECUMEN HOLDS IN TRUST DEPOSIT AMOUNTS RECEIVED BY TENANTS OF THE PROJECT UPON MOVE-IN. THERE ARE SEVERAL DIFFERENT TYPES OF THESE DEPOSITS INCLUDING SECURITY DEPOSIT, RESIDENT TRUST, AND UNIT SHARE. THE TENANT DEPOSITS ARE MAINTAINED IN AN INTEREST-BEARING ACCOUNT SEPARATE FROM ECUMEN'S OPERATING ACCOUNT. WITHDRAWALS ARE RESTRICTED TO THE REIMBURSEMENTS OF DEPOSIT AMOUNT.

PART V, LINE 4:

PERMANENT ENDOWMENT FUNDS ARE TO BE HELD IN PERPETUITY AND INCOME IS USED TO SUPPORT THE FACILITIES AND PROGRAMS OF ECUMEN. TERM ENDOWMENTS ARE HELD UNTIL THE SPECIFIC TIME OR EVENT HAS OCCURRED.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

THE ORGANIZATION HAS BEEN GRANTED EXEMPT STATUS RELATIVE TO FEDERAL AND MINNESOTA CORPORATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE FEDERAL INTERNAL REVENUE CODE AND APPLICABLE STATE CODES.

INCOME OR LOSS FROM ACTIVITIES CONSIDERED UNRELATED TO ECUMEN'S TAX EXEMPT PURPOSE IS RECORDED IN THE ACCOUNTS OF ECUMEN SERVICES, INC. INCOME TAXES FOR ECUMEN SERVICES, INC. ARE RECORDED AT THE PREVAILING STATUTORY RATES AND ARE INCLUDED IN OPERATING EXPENSE. THERE WERE NO INCOME TAXES PAYABLE AT DECEMBER 31, 2016 OR DECEMBER 31, 2015.

THE ORGANIZATION'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL, STATE, AND LOCAL AUTHORITIES. THE ORGANIZATION'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL, STATE, AND LOCAL AUTHORITIES. THE ORGANIZATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX-EXEMPT STATUS.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		DL CHARITY BENEFIT (event type)	ECUMEN GOLF TOURNAMENT (event type)	2 (total number)		
Revenue	1	Gross receipts	56,379.	49,035.	42,181.	147,595.
	2	Less: Contributions	47,801.	32,735.	33,266.	113,802.
	3	Gross income (line 1 minus line 2)	8,578.	16,300.	8,915.	33,793.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	3,078.	150.	350.	3,578.
	6	Rent/facility costs	500.	14,378.	2,187.	17,065.
	7	Food and beverages	4,837.	3,778.	6,536.	15,151.
	8	Entertainment	250.		600.	850.
	9	Other direct expenses	5,267.	2,680.	2,400.	10,347.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				46,991.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-13,198.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities. _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain _____

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 noncash assistance
EDUCATION GRANTS	171	277,508.	0.		
EMPLOYEE ASSISTANCE	8	16,170.	0.		

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

PART I, LINE 2:
FOR GRANTS, THE ORGANIZATION TAKES INTO CONSIDERATION THE GRANTEE'S GOALS AND OBJECTIVES WHEN DETERMINING A POTENTIAL CONTRIBUTION. WE FOCUS ON GRANTEES THAT ARE INVOLVED IN THE LONG-TERM CARE INDUSTRY AND LIMIT CONTRIBUTIONS TO ENTITIES THAT ARE DEEMED CHARITABLE ORGANIZATIONS. GRANTS TO RELATED ORGANIZATIONS ARE MONITORED THROUGH COMMON CONTROL AND MANAGEMENT. GRANTS TO NON-RELATED ORGANIZATIONS ARE NOT DIRECTLY MONITORED SUBSEQUENT TO FUNDS BEING GRANTED.

Part IV Supplemental Information

SCHOLARSHIP RECIPIENTS ARE REQUIRED TO PROVIDE TUITION STATEMENTS PRIOR TO RECEIVING SCHOLARSHIP FUNDS. EMPLOYEE ASSISTANCE RECIPIENTS ARE REQUIRED TO PROVIDE BILLS AND OTHER EXPENSE STATEMENTS PRIOR TO RECEIVING ASSISTANCE FUNDS.

Lined area for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No 1545-0047

2016

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

ECUMEN

Employer identification number

91-1982139

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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 | | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X | |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X | |
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 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 | X | |
| b Any related organization? | 5b | X | |
- If "Yes" on line 5a or 5b, describe in Part III.

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 | X | |
| b Any related organization? | 6b | X | |
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b	X	
4c	X	
5a	X	
5b	X	
6a	X	
6b	X	
7		X
8		X
9		

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

PART I, LINES 4B-C:

SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN:

KATHRYN ROBERTS - 457(F) - \$18,000

DENNIS JOHNSON - 457(F) - \$18,000

EQUITY-BASED COMPENSATION ARRANGEMENT:

SEE THE NARRATIVE IN SCHEDULE J, PART III, RELATED TO PART I, LINE 5. THE BONUSES OPERATE SIMILARLY TO AN EQUITY-BASED COMPENSATION PLAN.

PART I, LINE 5:

PURPOSE:

THE PURPOSE OF THE PLAN IS TO REWARD INDIVIDUAL AND TEAM ACCOMPLISHMENTS OF MANAGEMENT AND PROFESSIONAL STAFF THAT MAKE SIGNIFICANT CONTRIBUTIONS TO THE ACHIEVEMENT OF BUDGETED FINANCIAL AND STRATEGIC GOALS AS ESTABLISHED BY ECUMEN.

ELIGIBILITY:

ELIGIBILITY FOR THE PLAN IS LIMITED TO REGULAR MANAGEMENT EMPLOYEES WHO RETAIN THE JOB TITLE OF MANAGER, DIRECTOR, SENIOR DIRECTOR, VICE PRESIDENT,

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.

SENIOR VICE PRESIDENT OR CHIEF EXECUTIVE LEVEL OF THE HOME OFFICE, AND TO MANAGEMENT STAFF LOCATED OUTSIDE THE HOME OFFICE WITH JOB TITLES OF ADMINISTRATOR, HOUSING MANAGER, AND DEPARTMENT HEAD. OTHER KEY EMPLOYEES MAY BE INCLUDED IN THE PLAN AS APPROVED BY THE CHIEF EXECUTIVE OFFICER.

PLAN GOALS:

VARIABLE PAY PLAN PAYMENTS ARE EARNED BASED ON ACHIEVING AN ACTUAL EBITDA (EARNINGS BEFORE INTEREST, TAXES, DEPRECIATION & AMORTIZATION) FOR THE YEAR THAT FALLS WITHIN A RANGE OF 93% - 115% OF BUDGETED OPERATING EBITDA. HOME OFFICE PARTICIPANTS WILL HAVE ONLY ONE GOAL AROUND ECUMEN'S BUDGETED OPERATING EBITDA. LOCATION PARTICIPANTS WILL HAVE TWO GOALS, WITH 80% BASED ON LOCAL BUDGETED OPERATING EBITDA ACHIEVEMENT AND 20% ON CONSOLIDATED ACHIEVEMENT. BOTH THE LOCATION AND THE CONSOLIDATED THRESHOLDS MUST BE MET IN ORDER FOR A LOCATION TO RECEIVE A PAYOUT UNDER THIS PLAN. REGIONAL DIRECTORS HAVE THE SAME TWO GOALS WITH THE LOCAL GOAL BASED ON CAMPUS OPERATIONS. ECUMEN RESERVES THE RIGHT TO CHANGE THE EBITDA TO REFLECT CHANGES IN THE CURRENT BUSINESS PORTFOLIO. CHANGES ARE COMMUNICATED TO PARTICIPANTS.

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.

PART I, LINE 6:

SEE THE NARRATIVE IN SCHEDULE J, PART III, RELATED TO PART I, LINE 5. THE BONUSES ARE BASED ON EBITDA (EARNINGS BEFORE INTEREST, TAXES, DEPRECIATION AND AMORTIZATION), WHICH IS CLOSELY RELATED TO BOTH REVENUES AND NET EARNINGS.

ENTITY 1

OMB No. 1545-0047
2016
Open to Public Inspection

SCHEDULE K (Form 990)
Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

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

Name of the organization: **ECUMEN**
Employer identification number: **91-1982139**

Part I Bond Issues SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF OWATONNA, MN	41-6005444690562AA1	06/30/03	4,120,000	REFINANCING							
B CITY OF PINE CITY, MN	41-6005456722518AA5	04/27/06	8,100,000	PURCHASE OF FACILITIES							
C CITY OF APPLE VALLEY, MN	41-084761203789WAE0	03/29/10	5,545,000	NEW CONSTRUCTION							
D CITY OF MAPLEWOOD, MN	41-6008920565566AE6	07/01/10	5,875,000	NEW CONSTRUCTION							

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired			1,745,000	1,300,000	455,000			540,000
2 Amount of bonds legally defeased								
3 Total proceeds of issue			4,120,000	8,100,000	5,545,000			5,875,000
4 Gross proceeds in reserve funds					430,681			433,858
5 Capitalized interest from proceeds			3,841,720					2,298,710
6 Proceeds in refunding escrows			278,280	302,750	223,400			260,945
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds			7,797,250	4,890,919	2,881,487			
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2003		2006		2011		2010	
14 Were the bonds issued as part of a current refunding issue?	X			X		X		X
15 Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16 Has the final allocation of proceeds been made?	X		X	X		X		X
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X	X		X		X

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Name of the organization: **ECUMEN**
 Employer identification number: **91-1982139**

Part I Bond Issues SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased (h) On behalf of issuer		(i) Pooled financing		
						Yes	No	Yes	No	Yes
A CITY OF LAKE CRYSTAL, MN	41-6005294	509530BG5	08/10/10	6,865,000	NEW CONSTRUCTION			X		X
LAKES AREA ECONOMIC DEVELOPMENT AUTHORITY	20-0299143	NONE	09/14/11	9,320,000	SERIES 2002 AND 1 REFINANCING			X		X
CITY OF MOORHEAD, MN	41-6005386	61615CAB8	09/27/12	10,076,874	SERIES 2005A AND REFINANCING			X		X
MOORHEAD ECONOMIC DEVELOPMENT AUTHORITY, MN	41-1671510	61615JAR8	09/27/12	10,000,000	SERIES 2005A AND REFINANCING			X		X

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		470,000.		3,535,120.		2,085,000.		
2 Amount of bonds legally defeased								
3 Total proceeds of issue		6,865,000.		9,320,000.		10,076,874.		10,000,000.
4 Gross proceeds in reserve funds		508,849.						
5 Capitalized interest from proceeds		419,720.						
6 Proceeds in refunding escrows				5,909,645.		9,830,951.		9,757,473.
7 Issuance costs from proceeds		334,050.		102,726.		245,923.		242,527.
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds		550,000.						
10 Capital expenditures from proceeds		5,052,381.		3,307,629.				
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2010		2012		2012		2012	
14 Were the bonds issued as part of a current refunding issue?		X		X		X		X
15 Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16 Has the final allocation of proceeds been made?	X		X		X		X	
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

SCHEDULE K (Form 990)
Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization: **ECUMEN**
Employer identification number: **91-1982139**

Part I Bond Issues SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Deceased (h) On behalf of issuer		(i) Pooled financing			
						Yes	No	Yes	No	Yes	No
HOUSING AND A REDEVELOPMENT AUTHORITY	41-6006975	NONE	09/28/12	8,300,000	REFINANCING SERIES 2004A, 200			X		X	
LAKE COUNTY HOUSING AND B REDEVELOPMENT AUTHORITY	41-1563472	NONE	09/28/12	9,140,000	REFINANCING SERIES 2004A, 200			X		X	
C TOWN OF RICE LAKE, MN	41-6005489	NONE	09/28/12	5,560,000	REFINANCING SERIES 2004A, 200			X		X	
CITY OF FALCON HEIGHTS, D MN	41-6007644	NONE	01/04/13	4,400,000	REFINANCING SERIES 2005A BOND			X		X	

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	973,280.	1,071,860.	652,029.	479,483.
2 Amount of bonds legally defeased				
3 Total proceeds of issue	8,300,000.	9,140,000.	5,560,000.	4,400,000.
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows	7,984,423.	8,792,485.	5,348,602.	4,330,395.
7 Issuance costs from proceeds	154,104.	169,700.	103,231.	69,605.
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds	161,473.	177,815.	108,167.	
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2012	2012	2012	2013
14 Were the bonds issued as part of a current refunding issue?	X	X	X	X
15 Were the bonds issued as part of an advance refunding issue?		X	X	X
16 Has the final allocation of proceeds been made?	X	X	X	X
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X	X	X	X

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

SCHEDULE K (Form 990)
Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization: **ECUMEN**
Employer identification number: **91-1982139**

Part I Bond Issues SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF CHISAGO CITY, MN	41-60050461	7012CAR4	07/25/13	18,520,000	REFINANCING SERIES 2004A AND					X	X
B CITY OF ST. CLAIR, MN	41-6007794	363651LZ1	07/30/13	9,125,000	REFINANCING SERIES 2004D, 200					X	X
C CITY OF DETROIT LAKES, MN	41-6005098	NONE	08/01/13	2,670,748	REFINANCING SERIES 2004A BOND					X	X
D CITY OF WORTHINGTON, MN	41-6005656	98185OAX1	05/21/14	6,385,000	REFINANCING SERIES 2009A BOND					X	X

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		920,000		1,070,179		254,322		415,000
2 Amount of bonds legally defeased								
3 Total proceeds of issue		18,520,000		9,125,000		2,670,748		6,385,000
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows		18,046,679		9,013,939		2,635,370		6,198,840
7 Issuance costs from proceeds		473,321		111,061		35,379		186,160
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2013		2013		2013		2014	
14 Were the bonds issued as part of a current refunding issue?	X		X		X		X	
15 Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16 Has the final allocation of proceeds been made?	X		X		X		X	
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

SCHEDULE K (Form 990)
Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization: **ECUMEN**
Employer identification number: **91-1982139**

Part I Bond Issues SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CITY OF NORTH BRANCH, MN	41-6005421	NONE	11/25/14	4,075,000.	REFINANCING SERIES 2006B BOND		X		X		X
B CITY OF LAKE CRYSTAL, MN	41-6005294	509530BT7	12/18/14	8,316,913.	REFINANCING SERIES 2006 BONDS		X		X		X
C CITY OF OWATONNA, MN	41-6005444	690558AL5	12/18/14	6,797,665.	REFINANCING SERIES 2006 BONDS		X		X		X
D CITY OF MINNEAPOLIS, MN	41-6005375	603786AN2	05/18/15	32,052,494.	NEW CONSTRUCTION		X		X		X

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	365,676.	1,820,000.	260,000.	
2 Amount of bonds legally defeased				
3 Total proceeds of issue	4,075,000.	8,316,913.	6,797,665.	32,052,494.
4 Gross proceeds in reserve funds				2,042,556.
5 Capitalized interest from proceeds	3,959,541.	8,067,611.	6,593,903.	729,575.
6 Proceeds in refunding escrows	115,460.	249,302.	203,762.	640,000.
7 Issuance costs from proceeds				
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds				27,163,309.
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2014	2014	2014	2016
	Yes	No	Yes	No
	X		X	
		X		X
	X		X	
	X		X	

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X		X		X		X	
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Supplemental Information on Tax-Exempt Bonds
 Complete if the organization answered "yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

SCHEDULE K
(Form 990)
Department of the Treasury
Internal Revenue Service

Name of the organization
ECUMEN

Employer identification number
91-1982139

SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

Part I Bond issues	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A CITY OF WORTHINGTON, MN	41-6005656	NONE	03/15/16	5,900,000.	REFINANCE SERIES 2007A BONDS					X		X
B CITY OF VERGAS, MN	41-0900504923413AN8		08/29/16	10,105,987.	REFINANCE SERIES 2006 AND 2007 BONDS			X		X		X
C												
D												

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired			161,394.					
2 Amount of bonds legally defeased								
3 Total proceeds of issue			5,900,000.	10,105,987.				
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds			5,795,819.	9,155,987.				
6 Proceeds in refunding escrows			104,181.	315,000.				
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds				635,000.				
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion		2016						
14 Were the bonds issued as part of a current refunding issue?	X							
15 Were the bonds issued as part of an advance refunding issue?		X						
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	X							
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						

91-1982139

ECUMEN

Schedule K (Form 990) 2016

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?	X		X		X		X	
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X		X		X	
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?	X		X		X		X	
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

91-1982139

ECUMEN

Schedule K (Form 990) 2016

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	
Part IV Arbitrage								
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X		X		X		X	
b Exception to rebate?		X		X		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%	1.00	%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%	1.00	%		%		%
6 Total of lines 4 and 5		%	2.00	%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 6038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X		X		X		X	
b Exception to rebate?		X		X		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X		X		X		X	
b Exception to rebate?		X		X		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X		X					
b Exception to rebate?		X		X				
c No rebate due?		X		X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X				
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X		X				
6 Were any gross proceeds invested beyond an available temporary period?								
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	X							

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: LAKES AREA ECONOMIC DEVELOPMENT AUTHORITY	
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2002 AND 1998 BONDS	
(A) ISSUER NAME: CITY OF MOORHEAD, MN	
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2005A AND 2008A BONDS	
(A) ISSUER NAME: MOORHEAD ECONOMIC DEVELOPMENT AUTHORITY, MN	
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2005A AND 2008A BONDS	
(A) ISSUER NAME: HOUSING AND REDEVELOPMENT AUTHORITY OF DULUTH, MN	
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004A, 2004B, 2004C, AND 2005 BONDS	
(A) ISSUER NAME: LAKE COUNTY HOUSING AND REDEVELOPMENT AUTHORITY, MN	
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004A, 2004B, 2004C, AND 2005 BONDS	
(A) ISSUER NAME: TOWN OF RICE LAKE, MN	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions (Continued)

(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004A, 2004B, 2004C, AND 2005 BONDS

(A) ISSUER NAME: CITY OF FALCON HEIGHTS, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2005A BONDS

(A) ISSUER NAME: CITY OF CHISAGO CITY, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004A AND 2004B BONDS

(A) ISSUER NAME: CITY OF ST. CLAIR, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004D, 2004E, AND 2006 BONDS

(A) ISSUER NAME: CITY OF DETROIT LAKES, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2004A BONDS

(A) ISSUER NAME: CITY OF WORTHINGTON, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2009A BONDS

(A) ISSUER NAME: CITY OF NORTH BRANCH, MN
(F) DESCRIPTION OF PURPOSE: REFINANCING SERIES 2006B BONDS

(A) ISSUER NAME: CITY OF VERGAS, MN
(F) DESCRIPTION OF PURPOSE: REFINANCE SERIES 2006 AND 2007 BONDS

SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:
(A) ISSUER NAME: CITY OF OWATONNA, MN
DATE THE REBATE COMPUTATION WAS PERFORMED: 04/01/2008

(A) ISSUER NAME: CITY OF PINE CITY, MN
DATE THE REBATE COMPUTATION WAS PERFORMED: 04/14/2016

(A) ISSUER NAME: CITY OF APPLE VALLEY, MN
DATE THE REBATE COMPUTATION WAS PERFORMED: 02/28/2015

(A) ISSUER NAME: CITY OF MAPLEWOOD, MN
DATE THE REBATE COMPUTATION WAS PERFORMED: 02/28/2015

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions (Continued)

(A) ISSUER NAME: CITY OF LAKE CRYSTAL, MN
DATE THE REBATE COMPUTATION WAS PERFORMED: 07/31/2015

(A) ISSUER NAME: LAKES AREA ECONOMIC DEVELOPMENT AUTHORITY
DATE THE REBATE COMPUTATION WAS PERFORMED: 09/01/2016

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2016

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

ECUMEN

Employer identification number

91-1982139

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

ECUMEN COMPLETED FINANCING AND BEGAN PRE-SALES AND CONSTRUCTION IN 2015
ON ABIITAN MILL CITY, A NEW SENIOR LIVING COMMUNITY IN DOWNTOWN
MINNEAPOLIS. THIS \$42 MILLION, 133-UNIT COMMUNITY OPENED IN DECEMBER
2016.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

ECUMEN SOLD A NURSING HOME AND FOUR MARKET RATE HOUSING PROJECTS IN
2016. THESE PROJECTS WERE LOCATED IN SOUTHERN MINNESOTA AND STRUGGLED
TO MAINTAIN OCCUPANCY AND RETAIN STAFF. THESE SALES RESULTED IN THE
REDUCTION OF 90 NURSING HOME BEDS AND 71 MARKET RATE HOUSING UNITS.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE INCLUDES THE CHAIR, THE PRESIDENT, THE VICE
CHAIR(S), THE TREASURER AND THE SECRETARY. THE EXECUTIVE COMMITTEE HAS THE
AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS OF THE
ORGANIZATION IN THE INTERVAL BETWEEN BOARD MEETINGS, AND THE EXECUTIVE
COMMITTEE IS AT ALL TIMES SUBJECT TO THE CONTROL AND DIRECTION OF THE
BOARD. THE EXECUTIVE COMMITTEE HAS SUCH OTHER DUTIES AS MAY BE PRESCRIBED
BY THE BOARD FROM TIME TO TIME.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERS OF THE CORPORATION CONSIST OF THOSE INDIVIDUALS WHO ARE
CONCURRENTLY MEMBERS OF THE MEMBERS ASSEMBLY, AN ELECTORAL BODY THAT IS
ELECTED, DIRECTLY AND INDIRECTLY, BY THE SIX MINNESOTA SYNODS OF THE
EVANGELICAL LUTHERAN CHURCH IN AMERICA.

Name of the organization

ECUMEN

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91-1982139

FORM 990, PART VI, SECTION A, LINE 7A:

THE MEMBERS OF THE CORPORATION ELECT ALL TRUSTEES AFTER CONSIDERATION OF A SLATE OF NOMINEES APPROVED BY THE NOMINATING COMMITTEE. THE NOMINATING COMMITTEE CONSISTS OF FIVE MEMBERS OF THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7B:

THE FOLLOWING ACTIONS OF THE BOARD OF TRUSTEES REQUIRE APPROVAL FROM THE MEMBERS:

1. AMENDMENTS TO THE ARTICLES OF INCORPORATION
2. AMENDMENTS TO THE BYLAWS
3. APPOINTMENT OF INDIVIDUALS TO THE BOARD OF TRUSTEES

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS REVIEWED BY THE CFO, THEN PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL, THEN FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ECUMEN'S CONFLICT OF INTEREST POLICY APPLIES TO ALL TRUSTEES, OFFICERS, MANAGERS AND EMPLOYEES WHO CAN INFLUENCE THE ACTIONS OF ECUMEN, INCLUDING THOSE WHO MAKE PURCHASING DECISIONS OR WHO HAVE PROPRIETARY INFORMATION CONCERNING ECUMEN. THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO APPLICABLE PARTIES ANNUALLY AND A SIGNED CONFLICT OF INTEREST DISCLOSURE STATEMENT IS OBTAINED. THE POLICY STATES THAT IT IS THE RESPONSIBILITY OF THE APPLICABLE PARTY TO DISCLOSE A POTENTIALLY CONFLICTING TRANSACTION BEFORE IT IS CONSUMMATED AND TO CONTINUE TO SCRUTINIZE THEIR TRANSACTIONS AND DISCLOSE POTENTIAL CONFLICTS IMMEDIATELY. THE SIGNED CONFLICT OF

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INTEREST DISCLOSURE STATEMENTS ARE MONITORED BY AN H.R. GENERALIST IN THE HOME OFFICE AND BY THE VICE PRESIDENT OF HUMAN RESOURCES. THE VICE PRESIDENT OF HUMAN RESOURCES NOTIFIES THE CEO FOR DISCLOSURES INVOLVING EMPLOYEES, UNLESS THE EMPLOYEE IS THE CEO IN WHICH CASE THE BOARD CHAIR IS NOTIFIED. THE BOARD CHAIR NOTIFIES THE BOARD OR THE APPLICABLE COMMITTEE OF THE BOARD. DISCLOSURES INVOLVING TRUSTEES ARE MADE TO THE BOARD CHAIR, UNLESS THE BOARD CHAIR HAS A CONFLICT IN WHICH CASE THE VICE-CHAIR IS NOTIFIED. CONTROLS ARE PUT INTO PLACE TO MINIMIZE THE RISK OF A CONFLICT. THE CONTROLS ARE SPECIFIC TO THE POTENTIAL AREA OF CONFLICT. FOR INSTANCE, IF AN EMPLOYEE PROVIDES DAILY WORK DIRECTION TO A FAMILY MEMBER, ALL SALARY-RELATED DECISIONS FOR THAT FAMILY MEMBER WOULD BE ASSIGNED TO ANOTHER (NON-RELATED) PERSON. DURING BOARD DISCUSSIONS, THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL FOR THE CONFLICTING TRANSACTION. OTHER SPECIFIC RESTRICTIONS MAY BE IMPOSED, DEPENDING ON THE CONFLICT. A COMPETITIVE BID OR COMPARABLE VALUATION MUST EXIST. THE BOARD, OR DULY CONSTITUTED COMMITTEE, HAS DETERMINED THAT THE TRANSACTION IS IN THE BEST INTEREST OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15:

AN INDEPENDENT OUTSIDE CONSULTANT IS USED TO MAKE RECOMMENDATIONS FOR THE COMPENSATION OF THE PRESIDENT/CEO AND VICE PRESIDENTS. THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS AND APPROVES COMPENSATION FOR THE PRESIDENT/CEO. THE PRESIDENT/CEO CAN APPROVE THE COMPENSATION FOR THE OTHER EXECUTIVE POSITIONS, BUT REVIEWS HER RECOMMENDATIONS WITH THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES PRIOR TO IMPLEMENTATION.

A COMPLETE REVIEW OF THE VICE PRESIDENTS WAS COMPLETED IN 2016. THE PRESIDENT/CEO REVIEW IS COMPLETED ANNUALLY AND WAS LAST COMPLETED IN 2016.

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FORM 990, PART VI, SECTION C, LINE 19:

ECUMEN'S GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PERMANENTLY RESTRICTED ACTIVITY	27,715.
PATHSTONE NET INCOME	-31,286.
ECUMEN SERVICES PATHSTONE EQUITY ADJUSTMENT	301,741.
EQUITY TRANSFER TO ECUMEN SERVICES FOR DME STORE	-257,952.
TOTAL TO FORM 990, PART XI, LINE 9	40,218.

SCHEDULE R
(Form 990)

▶ **Related Organizations and Unrelated Partnerships**
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

2016
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

ECUMEN

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CDL HOMES, LLC - 20-1440841 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	SENIOR HOUSING	MINNESOTA	29,439,564	54,720,909	ECUMEN
LAKEVIEW COMMONS SENIOR LIVING, LLC - 20-4437549, 3530 LEXINGTON AVENUE NORTH, SHOREVIEW, MN 55126	SENIOR HOUSING	MINNESOTA	4,913,794	11,919,698	ECUMEN
OWATONNA SENIOR LIVING, LLC - 20-4076550 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	SENIOR HOUSING	MINNESOTA	2,117,283	6,058,058	ECUMEN
EVERCARE SENIOR LIVING, LLC - 20-2864571 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	SENIOR HOUSING	MINNESOTA	12,482,824	24,243,532	ECUMEN

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
BETHEL MANOR, INC. - 41-1773022 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	LOW-INCOME HOUSING	MINNESOTA	501(C)(3)	9	ECUMEN	X	
BETHEL MANOR II, INC. - 41-1347125 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	LOW-INCOME HOUSING	MINNESOTA	501(C)(3)	9	ECUMEN	X	
NEW RICHMOND SENIOR HOUSING, INC. - 41-1974837, 3530 LEXINGTON AVENUE NORTH, SHOREVIEW, MN 55126	LOW-INCOME HOUSING	MINNESOTA	501(C)(3)	9	ECUMEN	X	
AUGUSTANA LUTHERAN HOMES, INC. - 41-0734237 3530 LEXINGTON AVENUE NORTH SHOREVIEW, MN 55126	LOW-INCOME HOUSING	MINNESOTA	501(C)(3)	9	ECUMEN	X	
SHOREVIEW, MN 55126	LOW-INCOME HOUSING	MINNESOTA	501(C)(3)	9	ECUMEN	X	

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

Schedule R (Form 990) 2016

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
NORTH BRANCH AFFORD, HSG.												
DBA: UPTOWN MAPLE COMMONS - 41-18664198 3530 LEXINGTON												
AVE N SHOREVIEW MN 55126	SENIOR HOUSING	MN	N/A	RELATED	-14.	178.	X		N/A		X	.01%

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
ECUMEN SERVICES INC. - 41-1768508 3530 LEXINGTON AVENUE NORTH SHOREVIEW MN 55126	MANAGEMENT SERVICES	MN	ECUMEN	C CORP	4,066,942	-1,446,893	100.00%		X
BRIDGE REHABILITATION SERVICES, INC. - 41-1893649 3530 LEXINGTON AVENUE NORTH SHOREVIEW MN 55126	INACTIVE	MN	ECUMEN	C CORP	0.	0.	100.00%		X
DIVERSIFIED BUSINESS INSURANCE - 41-1843778 3530 LEXINGTON AVENUE NORTH SHOREVIEW MN 55126	INSURANCE	MN	ECUMEN	C CORP	0.	0.	100.00%		X
ONETWOONE DEVELOPMENT LLC - 47-3992783 3530 LEXINGTON AVENUE NORTH SHOREVIEW MN 55126	DEVELOPMENT	MN	ECUMEN	C CORP	2,001,701.	0.	100.00%		X
ZVAGO COOPERATIVE AT GLEN LAKE - 47-3511657 3530 LEXINGTON AVENUE NORTH SHOREVIEW MN 55126	DEVELOPMENT	MN	ECUMEN	C CORP	0.	11,545,392.	100.00%		X

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	Yes	No
1a		X
1b		X
1c		X
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k		X
1l	X	
1m		X
1n		X
1o		X
1p		X
1q	X	
1r	X	
1s		X

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LAMPLIGHTER MANOR, INC.	Q	209,627.	ACTUAL COST
(2) BETHEL MANOR, INC	Q	108,683.	ACTUAL COST
(3) BETHEL MANOR II, INC.	Q	115,176.	ACTUAL COST
(4) AUGUSTANA LUTHERAN HOMES, INC.	Q	386,191.	ACTUAL COST
(5) PARMLY LAKEVIEW, INC.	Q	172,871.	ACTUAL COST
(6) NORTH BRANCH AFFORDABLE HOUSING, DBA UPTOWN MAPLE COMMONS	Q	66,228.	ACTUAL COST

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) ECUMEN SERVICES	R	257,952	ACTUAL COST
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

