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Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Information about Form 990 and its instructions is at www.lrs.gov/form990.

Column of organization Demployer identification number	АГ	or the	20 to calendar year, or tax year beginning AFR 1, 20	TO and	enumy 19	$m \sim r$	2017	
Wolfer Prof. Pro	B C	heck if oplicable	C Name of organization			D Employe	r identific	ation number
Dough Districts and survive and street (or P.O. box II wall is not delivered to street address.) 105 5th Ave S 105 5th A		Johange	Women's Foundation of Minnesot	a				
Number of street (et P.J. out insules into testered to street aboress) 100 512 - 337 - 5010 612 - 33		Johange	Doing business as			}	41-1	635761
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Minneapolis, MN 55401 Help Is this a group return for subordinates? Ves X No particular principal		termin			500			
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Take Name Status Months		Jilon nendir		Backer		1		·
Undestrate WWW. WPMN. ORG HttG Group exemption number			same as C above			H(b) Are all s	abordinates in	cluded? Yes No
Second of organization:				4947(a)(1)	or 527	lf "No,	attach a	list (see instructions)
Beriffy describe the organization's mission or most significant activities: To invest in social change to achieve equality for all women and girls in Minnesota. 2 Check this box ▶ Lift the organization discontinued its operations or disposed of more than 25% of its net assots. 3 Number of voting members of the governing body (Part VI, line 1a) 4 20 5 Total number of voling members of the governing body (Part VI, line 1a) 6 19 6 19 7 Total number of individuals employed in calendar year 2016 (Part V, line 1b) 8 Contributions and grants (Part VIII, column (C), line 12 9 Program service revenue (Part VIII, fine 1a) 1 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2h) 10 Investment fincome (Part VIII, column (A), lines 3, 4, and 7d) 10 Investment fincome (Part VIII, column (A), lines 3, 4, and 7d) 10 Investment and similar amounts paid (Part IX, column (A), lines 13) 10 Salaries, other compensation, employee benefits (Part VIII, column (A), lines 13) 11 Selaries, other compensation, employee benefits (Part IX, column (A), lines 51) 12 Total numbers of the commense (Part IX, column (A), lines 25) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Selaries paid to or for members (Part IX, column (A), lines 15) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15) 16 Total numbers (Part IX, column (A), lines 12) 17 Other expenses (Part IX, column (A), line 25) 17 Other expenses (Part IX, column (A), line 12) 17 Other expenses (Part IX, column (A), line 25) 17 Other expenses (Part IX, column (A), line 25) 18 Total supenses. Add lines 13-17 (must equal Part IX, column (A), lines 12) 19 Total supenses. Add lines 13-17 (must equal Part IX, column (A), lines 15) 10 Total supenses. Add lines 13-17 (must equal Part IX, column (A), lines 15) 10 Total supenses. Add lines 13-17 (must equal Part IX, column (A), lines 15) 10 Total supenses. Add lines 13-17 (must equal Part IX, column (A), lines 15) 10 Total su						H(c) Group	exemption	number >
Briefly describe the organization's mission or most significant activities. To invest in social change to achieve equality for all women and girls in Minnesota. 2 Check this box	ΚF	orm of	organization: X Corporation Trust Association	Other -	L Year	of formation:	1983 M	State of legal domicile: MN
Briefly describe the organization's mission or most significant activities. To invest in social change to achieve equality for all women and girls in Minnesota. 2 Check this box		rt I	Summary					
achieve equality for all women and girls in Minnesota. Check this box			Briefly describe the organization's mission or most significant acti	vities; To i	nvest	in soc	ial cl	nange to
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1	9	8	Contributions and grants (Part VIII, line 1h)			4,184		5,180,729.
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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, Destaration Department of the repartment of which preparer has any knowledge. Sign Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer-Firm's name Eide-Bailly-LLP Use Only Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) Lee Roper-Batker, President/CEO Date Print/Type preparer's name Preparer-Firm's name Eide-Bailly-LLP Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) LX Yes No	<u> </u>		The state of the s		` 'Q\ _			
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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, Destaration Department of the repartment of which preparer has any knowledge. Sign Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer-Firm's name Eide-Bailly-LLP Use Only Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) Lee Roper-Batker, President/CEO Date Print/Type preparer's name Preparer-Firm's name Eide-Bailly-LLP Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) LX Yes No	Sag	20	\ A O\					
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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 the preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Preparer's signature Poeb Nelson, CPA Preparer Firm's name Eide Bailly-LLP Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) Minneapolis Modelief, it is true, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, Declaration of which preparer has any knowledge. Date PTIN PTIN Firm's EIN 45-0250958 Phone no.612-253-6500	폺	22	Net assets or fund balances. Subtract line 21 from line 20	- 1 J. J 1		23,344	,4/9.	25,883,967.
Sign Date								
Sign Here Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Deb Nelson, CPA Preparer- Firm's name								y knowledge and belief, it is
Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Pelid Deb Nelson, CPA Preparer- Firm's name Eide-Bailly-LLP Use Only Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) Lee Roper-Batker, President/CEO Proparer- Print/Type preparer's name Preparer's signature Date II-6-17 Splemployed P01264758 Firm's EIN 45-0250958 Phone no.612-253-6500	true	, corre	ct, and complete. Declaration at preparer (other than officer) is based on all	Information of w	vhich prepare	r has any knov	rledge.	
Lee Roper-Batker, President/CEO Type or print name and title Print/Type preparer's name Pelid Deb Nelson, CPA Preparer- Firm's name Eide-Bailly-LLP Use Only Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) Lee Roper-Batker, President/CEO Proparer- Print/Type preparer's name Preparer's signature Date II-6-17 Splemployed P01264758 Firm's EIN 45-0250958 Phone no.612-253-6500							11/2/1	1
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Paid Deb Nelson, CPA Deb Nelson, CPA			Type or print name and title					
Preparer Firm's name Eide Bailly LEP Firm's address 800 Nicollet Mall, Ste. 1300 May the IRS discuss this return with the preparer shown above? (see instructions) Med Nelson, CPA II-O-1/ Isalemployed P0.1264.758 Firm's EIN 45-0250958 Phone no.612-253-6500					1			PTIN
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Use Only Firm's address 800 Nicollet Mall, Ste. 1300 Minneapolis, MN 55402-7033 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No	_Pre	parer-	Firm's name Eide Bailly LLP			Fin		
Minneapolis, MN 55402-7033 Phone no.612-253-6500 May the IRS discuss this return with the preparer shown above? (see instructions) X yes No	Use	Only						
May the IRS discuss this return with the preparer shown above? (see instructions)						Ph	one no.61	2-253-6500
	Mar	y the I	<u> </u>					
Train duction in the second se					lions.			Form 990 (2016)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 4,342,522.

* On March 3, 2017, the Foundation held its inaugural Economic Opportunity Summit to bring together corporate, philanthropic, and individual donor-partners-with-policymakers, young women leaders, and

fund and/or making a planned gift.

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors9	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			X
9		8		-21
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
.0	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	.5		
• •	as applicable	, 4	· .	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		- *	home often
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_X_	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		ا ټا	
_	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		$\frac{x}{X}$
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		- <u>X</u> -
	Did the organization maintain an office, employees, or agents outside of the onited States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	\mathbf{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	-75		
. •	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	\mathbf{x}	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u> </u>		
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16)	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? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	_complete.Schedule.G,.Part-III	19		X

۲

Yes No

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 2 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 3 Did the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Schedule I, I was suited after December 31, 2002? If "Yes," arswer lines 24b through 24d and complete Schedule K If "No", go to line 25a 5 Did the organization neves than suited after December 31, 2002? If "Yes," arswer lines 24b through 24d and complete Schedule K If "No", go to line 25a 6 Did the organization neves any proceeds of tax-exempt bonds beyond a temporary peniod exception? 7 Did the organization neves any proceeds of tax-exempt bonds outstanding escrow at any time during the year? 8 Section 501(3), 501(4)4, and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 8 Did 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 organizations prior Forms 990 or 990/E2? If "Yes," complete Schedule L, Part II 9 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 2 In a neithful propriete Schedule L, Part IV 2 In a neithful propriete Schedule L, Part IV 2 In a neithful propriete Schedule L, Part IV 2 In a neithful propriete Schedule L, Part IV 2 In a neithful propriete Schedule L, Part IV 3 In the	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX, column (A), line 1º II "riss", complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2º II "Yes", complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, rustees, key employees, and ruphes to compensate demptoyees? If "Yes," complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule I, "Yes", that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule I, "Yes", that was resourced so fix exempt bonds beyond a temporary period exception? 24d	þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, columnified "Free," complete Schedule I. Part I and III 22 X 2 X 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2 X 2 2 X 2	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		_	
Part IX, column (A), line 2? If "Yes," complete Schedule I., Parts I and III 22		domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	X	
23 Det the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. 24 Det the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a. 25 Det the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 26 Det the organization and an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? 26 Section 50 (tq.)(3), 001(c)(4), and 50 (tq.)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes, "complete Schedule L, Part II" transaction has not been reported on any of the organization should be organization aware that it engaged in an excess benefit transaction with a desqualified person during the year? If "Yes, "complete Schedule L, Part II" to 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, instease, key employees, linghest compensated employees, or disqualified persons?" If "Yes, complete Schedule L, Part IV and the organization provide a grant or other assistance to an officer, director, trustee, or depet persons?" If "Yes, complete Schedule L, Part IV and an excess benefit transaction with one of the following parties (see Schedule L, Part IV and an extra section of the particular or any of the organization receive contributions of art, historical treasures, or other aimlar assets, or qualified conservation contributions? If "Yes, complete Schedule L, Part IV and an extra sections 30 1.7701 and 30 1.7701 37 If "Yes, complete Schedule R,	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K I" No", yo to here 25a b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c 25d 35d 3		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
Schedule / 24a Dut the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If **les*, *answer lines 24b through 24d and complete Schedule K. If *No.*, po to line 25a Dut the organization mental and proceeds of tax-exempt bonds beyond a temporary period exception? Dut the organization and are any proceeds of tax-exempt bonds beyond a temporary period exception? Dut the organization and an an escore account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Dut the organization and solici(220) organizations. Did the organization engage in an excess benefit transaction with a dequalified person during the year? If *Yes*, *complete Schedule L, Part I / 25a Section 501(x)3, 501(x)4), and 501(x)29 organizations. Did the organization engage in an excess benefit transaction with a dequalified person during the year? If *Yes*, *complete Schedule L, Part I / 25a Did the organization engage in an excess benefit transaction with a dequalified person and a property ear, and that the transaction with a dequalified person and a property ear. And that the transaction with a dequalified person and a property ear. And that the transaction with a dequalified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If *Yes*, complete Schedule L, Part IV and the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributors or applicable limpt thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If *Yes*, complete Schedule L, Part IV and the organization receive contributions of art, historical treasures, or other armilar assets, or qualified conservation contrib	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond issue with an outstanding principal emount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Z4b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Z4b Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d In the organization with a disqualified person during the year? 24d In the organization with a disqualified person during the year? 25d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the driganization in a sport year, and that the 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-E27 If "Yes," complete Schedule L, Part I In International Contributor or employee them that engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with one of the following parties (see Schedule L, Part IV International Contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a uniter for former officer, director, trustee, we peripoyee? If "Yes," complete Schedule L, Part IV International Contributor or employee themsel, and acceptions and exceptions are accepted to provide a grant or other assistance to an officer, director, trustee, or key employee (or a family member of a uniter for former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV International Contributor or employee thereof, agrant selection committee member, or to a 35% controlled entity or the instructions for appli		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	İ		1
sust day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a b Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? do the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? do the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do the organization with a disqualified person during the year? "Yes," complete Schedule L, Part II b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II 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, fursitions, fu		Schedule J	23	X	
Schedule K. If "Not", go to line 25s. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds? Did the organization martial an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization as an on behalf of "issuer for bonds outstanding at any time during the year? Did be decided to the period of the year of the organization engage 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 sport any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, experiences, directors, trustees, experiences, directors, trustees, experienced employees, or disqualified persons? If "Yes," complete Schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, experiency or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization provide a grant or other assistance to an officer, director, trustee, experience of the organization provide any of these persons? If "Yes," complete Schedule L, Part IV A nemty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule L, Part IV Did the organization receive contributions of art	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
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any tax-exempt bonds? 4 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I! 25b X 27 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 29 In a neithy of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization liquidate, terminate, or dissolve and cease operations? 10 Did the organization liquidate, terminate, or dissolve and cease operations? 11 "Yes," complete Schedule M. Part I II 20 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3 If "Yes," complete Schedule R,	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
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Form 990 (2016) Women's Foundation of Minnesota
Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1096 Enter 0- if not applicable 14		Check if Schedule O contains a response or note to any line in this Part V	_				
be Enter the number of Forms W.G.G included in time 1a. Enter 0-fr not applicable Del the enganzation comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the celendary year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 1b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-five (see instructions) 3b. If if ves, 1 are if filed a form 990 For for the year if 14%, 16 in east, provide an explanation in Schedule O 4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account if a foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 5b. If if ves, 1 enter the name of the foreign country. 5c. See instructions for fiting requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c. Was the organization party to a prohibeted tax shelter transaction at any time during the tax year? 5c. If ves, 1 on the Sarch 2b, did the organization that it was or is a purity to a prohibeted tax shelter transaction of if it ves, 1 on the Sarch 2b, did the organization that it was or is a purity to a prohibeted tax shelter transaction of it vesses to tax deductibles from 888617 6c. Doss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles from 888617 6c. If vess, 1 did the organization in encosts of \$15 make party as a contribution and party for goods and services provided to the payor? 7c. X 7d. Did the organization s				- 		Yes	No
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11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter-the amount-of-reserves-on-hand 13b 14a X		·			1		
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter-the amount-of-reserves-on-hand 13b 13c 14a X		· ·					
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			11a		1		
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount-of-reserves-on-hand 13c 14a X	12a	·		>	12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount-of-reserves-on-hand 13c 14a X		taran da antara da a					
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Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount-of-reserves on hand 13c 14a X				į	13a	$\neg \neg$	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount-of-reserves-on-hand 13c 14a X		·		ţ			
organization is licensed to issue qualified health plans _c_Enter_the amount-of-reserves on hand 13b _13b _13b _13c 14a X	b	·		1	- 1		
c_Enter the amount-of-reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X			13b	}			
· · · · · · · · · · · · · · · · · · ·	c		13c]	
	14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
			e 0				

Form 990 (2016) Women's Foundation of Minnesota 41-1635761 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 Section A. Governing Body and Management No Yes 20 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 20 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? X 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Νδ X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? $\tilde{\mathbf{X}}$ The organization's CEO, Executive Director, or top management official 15a $\overline{\mathbf{x}}$ Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MN, NY, AR 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. Indicate how you made these available. Check all that apply. X Upon request X Own website Another's website → Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records.

Heidi Walsh ~ 612-337-5010

105 Fifth Avenue South, Suite 300,

Minneapolis,

MN

55401

Form 990 (2016) 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 (A)	(B)			(()			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck			оле	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson i	s bot r/trus	h an tee)	compensation	compensation	amount of
	week (list any	ē			Γ		Γ	from the	from related organizations	other compensation
	hours for	trustee or director				B.		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee		Ì	ensat	'	(W-2/1099-MISC)		organization
	organizations	al fres	onal tr		loyee	Comp				and related
	below line)	Individual	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	•		organizations
(1) Susan Denk	3.00	=	드	ō	<u>-</u> -	± 5	9			
Chair	3.00	x		х				0.	0.	0.
(2) Victoria McWane-Creek	2.00	 	\vdash		┢		$\vdash \dashv$			
Vice Chair		x		х				0.	0.	0.
(3) Gail Polly-Nordhaus	2.00	Ħ	<u> </u>	-	\vdash	-	H			
Treasurer		x		x				0.	0.	0.
(4) Michael Resnick	2.00									
Secretary		X		Х				0.	0.	0.
(5) Jean Adams	2.00									
Trustee		X						0.	0.	0.
(6) Tawanna Black	1.00									
Trustee		X						0.	0.	0.
(7) Elena Brito Sifferlin	1.00]								
Trustee		X	ļ		_			0.	0.	0.
(8) John Choi	1.00	l							_	
Trustee		X			ļ	لِـــا		0.	0.	0
(9) Joanne Green	2.00	١								
Trustee	1 00	X						0.	0.	0
(10) Katharine Hull	1.00							•		_
Trustee	1.00	X	<u> </u>	<u> </u>	L.	<u> </u>		0.	0.	0
(11) Katharine Kelly	1.00	X				1		0.	0.	0
Trustee (12) Cindy Kent	1.00	₽	-			\vdash		<u> </u>	<u>U.</u>	0.
Trustee	1.00	X						0.	0.	0 .
(13) Rebecca Parson Klevan	2.00	<u> </u>				\vdash	\dashv	0.		0 .
Trustee	2.00	X						0.	0.	0.
(14) June La Valleur	2.00	-				\vdash	\dashv			
Trustee		X						0.	0.	0.
(15) Wendy Nelson	1.00	Ë	Н			Н	\vdash			
Trustee	=	X						0.	0.	0.
(16) Susan Segal	2.00	Ť	\vdash			\vdash	\vdash			
Trustee		x						0.	0.	0.
(17) Roderic Southall	2.00		П							
Trustee		X		L	L '	<u> </u>		0.	0.	0.
632007 11-11-16										Form 990 (2016

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (D) (E) (F) Average Position Name and title Reportable Reportable Estimated (do not check more than one hours per box, unless person is both an officer and a director/trustee) compensation compensation amount of week from from related other (list any the organizations compensation hours for organization (W-2/1099-MISC) from the ndividual trustee or related nstitutional trustee (W-2/1099-MISC) organization organizations ey employee and related below organizations line) 1.00(18) April Sutor Trustee X 0. 0. 0. 1.00 (19) Pheng Thao X 0. 0. Trustee 2.00 (20) Vicki White X 0. 0 0. Trustee 55.00 (21) Lee Roper-Batker X President/CEO 241,184 15,203. 45.00 (22) Heidi Walsh Vice President of Finance and Operat X 76,275 0. 15,707. 36.00 (23) Terry Cogger-Williams X 120,722. 0. 8,451. Vice President 45.00 (24) Saanii Hernandez-Mohr X 109,866. 0 7,691. Vice President 548,047 Ō. 1b Sub-total σ. 0. c Total from continuation sheets to Part VII, Section A 548,047. 0. 47,052. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on X line 1a? If "Yes," complete Schedule J for such individual 3 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 Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form 990 (2016)

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
ran		Membership dues	1b				1	
S E	c	_	1c					
ifts ar A	ď		1d		,			1
S,E		Government grants (contribut	 - -		. *	,		1
Sign		All other contributions, gifts, gran				*		1
her	•	similar amounts not included abo	1 1	5,180,729.	,	, , ,		,
햧	_	Noncash contributions included in lines	- ا	450,328.	* ,]
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f			5,180,729.	*		. 4
<u> </u>		Total: Add lines 14 11		Business Code				
0	2 a			<u>Dusiness</u> Code	and the second discount of the second	no me for more donor a	and a markle arms.	
, vic	b			ļ				
Ser	C			<u> </u>		<u> </u>		
E S	d	. 						
Program Service Revenue	e	·		· · · · · · · · · · · · · · · · · · ·				
Pr	f		enue					
		Total. Add lines 2a-2f		<u> </u>		×	* . *,	
	3	Investment income (including	dividends, intere				<u> </u>	
	_	other similar amounts)		•	243,393.			243,393.
	4	Income from investment of ta	x-exempt bond r	- 1				
	5	Royalties		•				
	-		(ı) Real	(II) Personal	, , ,	, , , , ,	, , ;	
	6 a	Gross rents	177.13.11	1	* * * * * *	. **	*	*
		Less, rental expenses	ļ ————		· · ·	* , *		1
	ĺ	Rental income or (loss)	<u> </u>	1	·			·
		Net rental income or (loss)	L	•	***** ** ** * *** * *		an a management	m no voc m n o on d
		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	1,005,553.					/ i
	b	Less, cost or other basis	<u> </u>			į		1
		and sales expenses	984,327.	, ,				,
	C	Gain or (loss)	21,226.		:			
		Net gain or (loss)		•	21,226.			21,226.
a l		Gross income from fundraisin	a events (not					
nue		including \$	of	1 1			•	1
9.6		contributions reported on line						,
Other Reven		Part IV, line 18	a]		li .		
the	b	Less direct expenses	b					
0		Net income or (loss) from fund	draising events	•				
		Gross income from gaming ac	-					
		Part IV, line 19	a	}				
	b	Less: direct expenses	 b			Ī		
i		Net income or (loss) from gam	ing activities	•				
		Gross sales of inventory, less						
		and allowances	а	1				
	ь	Less: cost of goods sold	b					
	1	Net income or (loss) from sale	s of inventory	•			-	
		Miscellaneous Revenu		Business Code				
	11 a	Other income		900099	12,500.	12,500.		
	b	·						
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		>	12,500.			
	12	Total revenue. See instructions.			5,457,848.	12,500.	0.	264,619.

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mnlete column (A)					
2301	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								
	not include amounts reported on lines 6b, 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	0.040.544							
	and domestic governments. See Part IV, line 21	2,243,711.	2,243,711.						
2	Grants and other assistance to domestic	1							
	individuals See Part IV, line 22								
3	Grants and other assistance to foreign	ļ							
	organizations, foreign governments, and foreign	10 000	10 000						
	individuals. See Part IV, lines 15 and 16	10,096.	10,096.						
4	Benefits paid to or for members	·							
5	Compensation of current officers, directors,	390,044.	105 570	101 626	2 940				
_	trustees, and key employees	370,044.	195,578.	191,626.	2,840.				
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	1,009,430.	891,880.	105,196.	12,354.				
8	Pension plan accruals and contributions (include	±10001±301	051,000.		12,334.				
J	section 401(k) and 403(b) employer contributions)	61,124.	54,025.	7,099.					
9	Other employee benefits	98,964.	85,431.	13,533.					
10	Payroll taxes	95,429.	76,330.	18,044.	1,055.				
11	Fees for services (non-employees)	30,1231							
··· a	Management								
	Legal	2,349.		2,349.					
	Accounting	17,720.		17,720.					
	Lobbying	i							
	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 0.)	461,683.	362,558.	99,125.					
12	Advertising and promotion	7.	7.						
13	Office expenses	95,065.	72,047.	22,928.	90.				
14	Information technology	22,932.	17,758.	5,174.					
15	Royalties		·						
16	Occupancy	110,686.	85,571.	25,115.					
17	Travel	56,878.	47,054.	9,423.	401.				
18	Payments of travel or entertainment expenses		}						
	for any federal, state, or local public officials	136 110							
19	Conferences, conventions, and meetings	136,419.	90,520.	45,563.	336.				
20	Interest								
21	Payments to affiliates	57,645.	44,640.	12 005					
22	Depreciation, depletion, and amortization	7,614.	5,896.	13,005.					
23	Other expenses, Itemize expenses not covered	7,014.	5,030.	1,/10.					
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)								
а	Equipment	67,056.	50,633.	16,423.					
b	Sale/Transfer Fees	7,662.	5,624.	2,038.					
c	Membership/Dues	5,302.	1,639.	3,663.					
d	Subscriptions	2,205.	1,524.	681.					
	All other expenses	3,389.		3,389.					
25	Total functional expenses. Add lines 1 through 24e	4,963,410.	4,342,522.	603,812.	17,076.				
26	Joint costs. Complete this line only if the organization			-					
	reported in column (B) joint costs from a combined		}						
	educational campaign and fundraising solicitation.	j	Ì						
	Check here In following SOP 98-2 (ASC 958-720)								

__ - - ---

Form 990 (2016)
Part X Balance Sheet

Parl	t 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
1	1	Cash - non-interest-bearing		1_	
1	2	Savings and temporary cash investments	4,897,448.	2	4,588,630.
	3	Pledges and grants receivable, net	1,189,420.	3	2,575,625
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,	1		
1		trustees, key employees, and highest compensated employees. Complete	arrows are seen as an arrow as seen and	`	em c encerno n a m ench dis e
		Part II of Schedule L		5	
- {	6	Loans and other receivables from other disqualified persons (as defined under			
1		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	g ,	. ,	,
- 1		employers and sponsoring organizations of section 501(c)(9) voluntary			man on the state of the state o
<u>ş</u>		employees' beneficiary organizations (see instr) Complete Part II of Sch L	L	6	
Assets	7	Notes and loans receivable, net	L	7	
۱ ۲	8	Inventories for sale or use	L	8	
-	9	Prepaid expenses and deferred charges	95,546.	9	69,583
- 1	10a	Land, buildings, and equipment. cost or other			*
Ì		basis. Complete Part VI of Schedule D 10a 531,819		ا سا	
-	b	Less: accumulated depreciation 10b 353,599		10c	178,220
- {	11	Investments - publicly traded securities	 	11	18,651,435
- [12	Investments - other securities. See Part IV, line 11	_ 	12	
- 1	13	Investments - program-related. See Part IV, line 11		13	600,000
- {	14	Intangible assets		14	205
ŀ	15	Other assets. See Part IV, line 11		15	<287,056
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	26,376,437
	17	Accounts payable and accrued expenses		17	173,470
ı	18	Grants payable		18	319,000
-	19	Deferred revenue	 	19	
- 1	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Sel	22	Loans and other payables to current and former officers, directors, trustees,	1		
		key employees, highest compensated employees, and disqualified persons			to the material can be specified as appropriate
Liabilities		Complete Part II of Schedule L		22	
Ì	23	Secured mortgages and notes payable to unrelated third parties		23_	
-	24	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X of			1
i		Schedule D		25	
- }	26	Total liabilities. Add lines 17 through 25		26	492,470
-	26	Organizations that follow SFAS 117 (ASC 958), check here	1	20	1,72,1,0
<u>"</u>		complete lines 27 through 29, and lines 33 and 34.]		
2	27	Unrestricted net assets	1,738,911.	27	2,120,149
alar 	28	Temporarily restricted net assets	_ 	28	9,589,043
ã	29	Permanently restricted net assets		29	14,174,775
Š	25	Organizations that do not follow SFAS 117 (ASC 958), check here			
<u> </u>		and complete lines 30 through 34.	{		
13	30	Capital stock or trust principal, or current funds	1	30	
ese	31	Paid-in or capital surplus, or land, building, or equipment fund	} -	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances		33	25,883,967
1	34	Total liabilities and net assets/fund balances		34	26,376,437
	<u></u> -	Total Industrials and the decoration buildings			Form 990 (2016

orm	990 (2016) Women's Foundation of Minnesota	41-	-1635	761	Pa	ge 12
Pa	t 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	5	,45	<u>7,8</u>	48.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	,96		
3	Revenue less expenses. Subtract line 2 from line 1	3				38.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		,54		
5	Net unrealized gains (losses) on investments	5	1	,84	5,0	50.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	25	,88	<u>3,9</u>	<u>67.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					<u> </u>
					Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other] ,]		,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		1 2		·
2a				2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			*/	<u> </u>
	separate basis, consolidated basis, or both			· 1		` .
	Separate basis Consolidated basis Both consolidated and separate basis					S
b				2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs	·.	1 1	4.	ز ز
	consolidated basis, or both.				:	Î
	Separate basis Consolidated basis Both consolidated and separate basis				1	· · ·
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		2_4	1.
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			1 1	, ,	، (
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	igle Au	dıt			:
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red au	dıt	} }		1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990 ((2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

Women's Foundation of Minnesota 41-1635761 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (iii) Type of organization (v) Amount of monetary (ii) EIN (vi) Amount of other in vous governing docume (described on lines 1-10) organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 Women's Foundation of Minnesota 41-16357 | 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.)

Sec	tion A. Public Support						
Cale	ndar 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 ")	2256174.	4337658.	2708698.	4184722.	5180729.	18667981.
2	Tax revenues levied for the organ-						
	ization'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	2256174.	4337658.	2708698.	4184722.	5180729.	18667981.
5	The portion of total contributions		,	, %		, , ,	
	by each person (other than a	v	, "	, ,		, ,	
	governmental unit or publicly		, ,	4	٠,	, " (, ' ()	
	supported organization) included	\$, , , ,	, ,	»	
	on line 1 that exceeds 2% of the	. * *	, `	ĺ	4	, ,	
	amount shown on line 11,		, ,	* * ·	4		
	column (f)				* ` ,	* * *	3914172.
	Public support. Subtract line 5 from line 4	»		*		,	14753809.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013 4337658.	(c) 2014 2708698.	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	2256174.	433/658.	2708698.	4184722.	5180729.	18667981.
8	Gross income from interest,						
	dividends, payments received on			1	1	1	
	securities loans, rents, royalties						
	and income from similar sources	562,114.	375,286.	360,719.	301,627.	299,182.	1898928.
9	Net income from unrelated business						
	activities, whether or not the						•
	business is regularly carried on			L			
10	Other income. Do not include gain						
	or loss from the sale of capital	45 540	001	F 001	B 645	40 500	44 000
	assets (Explain in Part VI)	15,712.	201.	5,001.	7,615.	12,500.	41,029.
	Total support. Add lines 7 through 10		L				20607938.
	Gross receipts from related activities,					12	717,795.
13	First five years. If the Form 990 is for	_	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	. —
<u> </u>	organization, check this box and storetion C. Computation of Publ	here	rcentage				
						441	71.59 %
	Public support percentage for 2016 (I	,,,	-	column (t))		14	
	Public support percentage from 2015			- 1 10	14:- 22:1/20/	15	
108	33 1/3% support test - 2016. If the content have The experience supplies	J		· ·	14 IS 33 1/3% OF II	iore, check this bo	x and ►X
	stop here. The organization qualifies		-		lino 15 to 22 1/20/	or more sheet th	•
L	33 1/3% support test - 2015. If the c	•			ine 13 is 33 1/370	or more, check ti	IIS DOX
170	and stop here. The organization qual	· · · · · · · · · · · · · · · · · · ·	-		12 162 2-165	and line 14 is 100/	or more
178	 10% -facts-and-circumstances tes and if the organization meets the "fact 	_					
	meets the "facts-and-circumstances"				=	t vi now the organ	iization
1.	10% -facts-and-circumstances tes	_	•		•	17a and line 15 in	10% or
D	more, and if the organization meets the	_				•	
	organization meets the "facts-and-circ				•		·
18	Private foundation. If the organization						
<u></u>				_, , . , , . , . , . , . , .		dule A (Form 990	

(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.)

Se	ction A. Public Support								
Cale	ndar 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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that		}						
	are not an unrelated trade or bus- iness under section 513						<u> </u>		
4	Tax revenues levied for the organ- ization'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		1						
7:	Amounts included on lines 1, 2, and 3 received from disqualified persons								
ŀ	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								
	Add lines 7a and 7b		<u> </u>		 	 			
	Public support. (Subtract line 7c from line 6)		1	,	1	1			
	ction B. Total Support						_		
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
9	Amounts from line 6		1	1	T		7		
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
ı	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
(Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
	Total support. (Add lines 9, 10c, 11, and 12)	the ergenization'	a first second #5	d fourth or fifth	lov voor op a pasti	E01(a)(2) ====	uzation		
14	First five years. If the Form 990 is for check this box and stop here	ule organization?	s irst, second, thi	ia, iounii, or iinn i	iax year as a section	on ou r(c)(o) orgal	nzation,		
50	ction C. Computation of Publ	ic Support Pe	rcentage						
	Public support percentage for 2016 (column (fl)		15	%		
16				column (1 <i>))</i>		16			
	ction D. Computation of Inve					1.101			
17						17			
18				10 10, 00141111 (1))		18	<u> </u>		
	a 33 1/3% support tests - 2016. If the			on line 14, and lin	e 15 is more than				
		-					▶□		
1	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								
		=							
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV | Supporting Organizations

(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

- 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.)

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		Yes	No
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0	90 or 99	M-F71	2016

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust o	n Nov 20, 1970 (explain in I	Part VI.) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	omplete :	Sections A through E	
Sect	on 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			<u> </u>
	collection of gross income or for management, conservation, or	1		
	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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	T	, , , ,	_ 4 _ , 4
	instructions for short tax year or assets held for part of year).	- 1	, y , \$	* >
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion 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-functional instructions).	lly integra	ated Type III supporting orga	inization (see

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 Women's Foundation of Minnesota 41-1635761 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 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 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2016 from Section C, line 6 Line 8 amount divided by Line 9 amount 10 (iii) Underdistributions Distributable **Excess Distributions** Pre-2016 Amount for 2016 Section E - Distribution Allocations (see instructions) Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI) See instructions Excess distributions carryover, if any, to 2016. а 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. 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 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 Excess distributions carryover to 2017. Add lines 3j and 4c Breakdown of line 7: а

Schedule A (Form 990 or 990-EZ) 2016

b Excess from 2013c Excess from 2014d Excess from 2015e Excess from 2016

•						_			_			
Schedule A												41-1635761 Page 8
Part VI	Part IV, S line 1, Pa	ection A, li rt IV, Secti), lines 5, 6	nes 1, 2 on D, lin	, 3b, 3c, 4 es 2 and 3	b, 4c, 5a 3, Part IV	a, 6, 9a, 9 ', Section	9b, 9c, 11a n E, lines 1d	a, 11b, c, 2a, :	and 11 2b, 3a, a	c, Part IV, S and 3b, Pari	ection B, lines t V, line 1; Part \	r 17b, Part III, line 12; 1 and 2, Part IV, Section C, V, Section B, line 1e; Part V, anal information.
Schedu	le A,	Part	II,	Line	10,	Expl	anati	on	for	Other	Income:	
Other	Incom	e										
2012 A	mount	: \$	15,	712.								
2013 A	mount	: \$	201	<u>.</u>								
2014 A	mount	: \$	5,0	01.								
2015 A	mount	: \$	7,6	15.								
2016 A	mount	: \$	12,	500.			·					
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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2016

Open to Public

Inspection

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) organiza	tions. Complete Part III.			
Nar	ne of organization			Ē	mployer identification number
	Women's	Foundation of Mi	nnesota		41-1635761
P	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 52	7 organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures	l campaign activities in		> \$
	,				
Pa	art I-B Complete if the org	ganization is exempt unde	r section 501(c)(3)	
1	Enter the amount of any excise tax	incurred by the organization under	er section 4955)	> \$
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955		> \$
	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		Yes No
	a Was a correction made?				Yes No
_	o If "Yes," describe in Part IV				547-VO
		ganization is exempt unde			
	Enter the amount directly expended		•		\$
2	Enter the amount of the filing organ	nization's funds contributed to other	er organizations for se	_	
	exempt function activities			•	\$
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here an	d on Form 1120-POL,		
	line 17b			•	* \$
	Did the filing organization file Form	•			Yes No
5	Enter the names, addresses and er		•	_	• •
	made payments For each organiza contributions received that were pr	*	• •		•
	political action committee (PAC). If			•	arate segregated fund of a
			T		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds. If none, enter	contributions received and
	····				

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

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 Part II-A Complete if the org	Women's F	oundation of	Minnesota	41-1	635761 Page 2				
section 501(h)).	,umzacion io (skempt under seem	on correspos and n		lection under				
A Check ► ☐ if the filing organiza	ition belongs to ai	n affiliated group (and list	ın Part IV each affiliated	group member's nam	ne, address, EIN,				
expenses, and sha	· · · · · · · · · · · · · · · · · · ·	•							
B Check Lifthe filing organiza	tion checked box	A and "limited control" p	rovisions apply.						
	ts on Lobbying E ditures" means a	expenditures Expenditures	l.)	(a) Filing organization's totals	(b) Affiliated group totals				
1a Total lobbying expenditures to infli	uence public opin	ion (grass roots lobbying)		 					
b Total lobbying expenditures to infli	uence a legislative	e body (direct lobbying)		50,017.					
	—								
d Other exempt purpose expenditure	·			50,017.					
, , , ,	e Total exempt purpose expenditures (add lines 1c and 1d)								
f Lobbying nontaxable amount. Enti-	•	•	oth columns	4,342,522. 367,126.	t				
If the amount on line 1e, column (a) o		lobbying nontaxable an			, , , , , , , , , , , , , , , , , , ,				
Not over \$500,000		% of the amount on line 1		, , , , /					
Over \$500,000 but not over \$1,00	0.000 \$10	00,000 plus 15% of the ex	cess over \$500,000.	*	ł				
Over \$1,000,000 but not over \$1,5		5,000 plus 10% of the ex							
Over \$1,500,000 but not over \$17		25,000 plus 5% of the exc		*	* , , ,				
Over \$17,000,000									
(
g Grassroots nontaxable amount (er	91,782.								
h Subtract line 1g from line 1a If zer		•		0.					
i Subtract line 1f from line 1c. If zero	•			0.					
j If there is an amount other than ze	•		zation file Form 4720	L	4 — 				
reporting section 4911 tax for this		,		[Yes No				
	4-Year	r Averaging Period Unde							
(Some organizations t		on 501(h) election do no eparate instructions for l		of the five columns b	elow.				
	Lobbying E	xpenditures During 4-Ye	ear Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total				
2a Lobbying nontaxable amount	293,80	306,913	320,256.	367,126.	1,288,097.				
b Lobbying ceiling amount (150% of line 2a, column(e))					1,932,146.				
c Total lobbying expenditures	138,42	92,662	70,108.	50,017.	351,215.				
d Grassroots nontaxable amount	73,45	76,728	80,064.	91,782.	322,025.				
e Grassroots ceiling amount (150% of line 2d, column (e))					483,038.				
f Crassrate labbung evanditures	34.85	55.			3/ 955				

Schedule C (Form 990 or 990-EZ) 2016 Women's Foundation of Minnesota 41-163576 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)).

of the following activity. 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? Paid staff or management (include compensation in expenses reported on lines 1c through 1ij?? c Media advertisements? d Mellings to members, legislations, or the public? e Publicitations, or published or broadcast statements? 1 Grants to other organizations for bobbyrg purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Falles, demonstrations, seminars, conventions, speaches, lectures, or any similar means? i Other activities? 1 Total Add lines 1s through 11 2a Dat the extrines in his 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the lining organization accurated section 4912 tax, did if the Form 4720 for this year? Part IIII-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (60% or more) dues received nondeductible by members? 2 Did the organization gives to carry over libbying expenditures of \$2,000 or less? 3. Dot the organization agree to carry over libbying and political expenditures from the prior year? 3. Dot the organization agree to carry over libbying and political expenditures (do not include amounts of political expenditures from the prior year? 1 Dues, assessments and smiss amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures expenses for which the section 627(f) tax was paid). a Carrorit year 5 Datable amount on the carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions). 5 Totable amount of lobbying and political expenditures (see instructions). 5 Totabl	For e	or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)		
iocal legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other originazions for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines to through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "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 if 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? 2 Dot the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to camy over lobbying and political campaign activity expenditures from the prior year? 1 Dies, assessments and similar amounts from members 1 Dies, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expensives for which the section 527(f) tax was paid). a Current year 2 Dies, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expensive for which the section 527(f) tax was paid). a Current year 5 Total A gorgapate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 reasonab	of the	e lobbying activity.	Yes		No	Amo	unt	
or referendum, through the use of. a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b! If "Yes," enter the amount of any tax incurred under section 4912 c! If "Yes," enter the amount of any tax incurred under section 4912 c! If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d! If the filling 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). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2 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? 5 Taxable amount of lobbying and political expenditures (see instructions) 6 Did the organi	1	During the year, did the filing organization attempt to influence foreign, national, state or	T	Π			-	
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1: 2a Dd the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "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). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Dd the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Dd the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 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 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 b Carryover from last year c Total 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 dose the organization agree to carryover to the reasonable estimate		local legislation, including any attempt to influence public opinion on a legislative matter	1	1				
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d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if 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). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 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 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 b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 if notices were sent and the amount on line 2 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? 5 Taxable amount of lobbying and political expenditures (see instructions) Provide the description	b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>	↓		' ·		
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f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b! "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 if life 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). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 1 Dues, assessments and similar amounts from members 2 Section 162(e) condeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Carrent year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2 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 expenditure			<u> </u>	↓				
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j Total Add lines 1c through 1 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 cto. If "Yes," enter the amount of any tax incurred by organization managers under section 4912 dto. If the filing organization incurred a section 4912 tax, did if the 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	h	·		╄				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did if 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 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to agree till—A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Cotarly over from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 expenditure ext year? Taxable amount of lobbying and political expenditures (see instructions) 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 (se	i		<u> </u>	↓				
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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 Yes No 1 Yes No Yes No 1 Yes No Yes Y			 `	ـــ	· ·			
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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	_5_				5			
·	Pai	t IV Supplemental Information						
			p list); Part	li-A, lıı	nes 1 a	and 2 (see		
			····					
		·						
		·						
								

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 16 Open to Public Inspection

Name of the organization

Women's Foundation of Minnesota

Employer identification number 41-1635761

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	50	1
2	Aggregate value of contributions to (during year)	745,828.	13,000.
3	Aggregate value of grants from (during year)	740,574.	15,000.
4	Aggregate value at end of year	5,955,456.	1,083.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	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	
	ımpermissible private benefit?		X Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	<u></u>
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	• •	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structi	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
_	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of wolations, and enforcing appearan	tion accoments during the year
•	S	aling of violations, and emoleting conserva-	don easements during the year
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	(h)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?	To equally the requirements of section 17 of	Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	
•	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements		
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of put	olic 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 tre	asures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1	<u>-</u>	> \$
<u>_b</u>	Assets included in Form 990, Part X		 \$

Sche		Foundation			ther	Simile	41-16	35761	Page 2
3	Using the organization's acquisition, accessi	on, and other record	s, cneck any of the	tollowing that are	a signi	ificant i	use of its	collection	items
	(check all that apply).		- 1.						
a	Public exhibition	d	C1	hange programs					
b	Scholarly research	е	L Other				 .		
С	Preservation for future generations								
4	Provide a description of the organization's co	•	•	-	•		ose in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or other si	nılar as	sets		_	
	to be sold to raise funds rather than to be ma							Yes	No_
Par			ete if the organizatio	n answered "Yes	on Fo	rm 990), Part IV,	line 9, or	
	reported an amount on Form 990, Par	rt X, line 21.							
1a	Is the organization an agent, trustee, custode	an or other intermed	liary for contribution	s or other assets	not inc	luded		_	
	on Form 990, Part X?							Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:						
								Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					11			
2a	Did the organization include an amount on Fe	orm 990 Part X line	21 for escrow or ci	istodial account l	iability?			Yes	No
	if "Yes," explain the arrangement in Part XIII.				•				一"
Par									
	January Complete	(a) Current year	(b) Prior year	(c) Two years bad		Three v	ears back	(e) Four ye	ears hack
10	Beginning of year balance	18,164,302.	19,793,093.	18,619,44			76,743.		51,378.
	· · ·	118,619.	339,250.	999,45			83,755.		08,602.
b	Contributions	2,109,629.							
C .	Net investment earnings, gains, and losses		<562,142.				39,300.		38,505.
d	Grants or scholarships	314,629.	245,185.	286,55	 		69,061.		06,709.
е	Other expenditures for facilities		4 005 440			_		_	
	and programs	1,044,000.	1,085,410.	1,179,00			56,000.		64,422.
f	Administrative expenses	76,992.	75,304.	67,40			55,291.		50,611.
g	End of year balance	18,956,929.	18,164,302.	19,793,09	3.	18,6	19,446.	17,3	76,743.
2	Provide the estimated percentage of the curr		e (line 1g, column (a	a)) held as:					
а	Board designated or quasi-endowment	2.44	_%						
b	Permanent endowment ► 74.77	%							
C	Temporarily restricted endowment ▶2	2.79 %							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered t	or the	organız	ation		
	by:							Y	es No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	red on Schedule R?					3b	
4	Describe in Part XIII the intended uses of the	-							
	t VI Land, Buildings, and Equipm								
L	Complete if the organization answered). Part IV. line 11a. S	See Form 990. Par	t X. line	e 10.			
	Description of property	(a) Cost or o) Accu		ud	(d) Book v	ralue
	bescription of property	basis (investr	. [,,	(other)	depred		.	(u) book v	alue
	Lond	243.5 (11146311)	Dusis i	(-3.0.)	250160		 		
	Land	 							
	Buildings	 		3,304.		1,10			1/2
	Leasehold improvements	 							,143.
	Equipment	 	49	8,515.		2,43	20.	140	,077.
	Other							4 20 0	000
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0c)				T/8	,220.

Schedule D (Form 990) 2016

1.	(a) Description of liability	(b) Book value
(1) Fe	ederal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Co	olumn (b) must equal Form 990, Part X, col. (B) line 25.)	▶ ∤

^{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 X

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

been determined not to be private foundation under Section 509(a)(1). The

632054 08-29-16

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2016
Open to Public Inspection

Name of the organization

Employer identification number

Nomen's Foundat	ion of M	innesota		41-16357	61
			tside the United States. Comple		
Form 990, Part I				•	
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other assistance,	
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes No
2 For grantmakers. Description United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance ou	tside the
3 Activities per Region (T	he following Part	t I, line 3 table ca	an be duplicated if additional space is i	needed.)	
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		(f) Total
	offices in the region	employees, agents, and independent contractors in the region	(by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	is a program service, describe specific type of service(s) in the region	expenditures for and investments in the region
Sub-Saharan Africa -					
angola, Benin,		ļ			
Botswana, Burkina		}	,		1
aso,	0	0	grant	general operating	5,000.
South Asia -		}			\
Afghanistan,		1			·
Bangladesh, Bhutan,)	<u>.</u>		
ndia, Maldives,	0	0	grant	general operating	5,096.
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3 a Sub-total	0	0		 	10,096.
b Total from continuation		_			_
sheets to Part I		0	 		0.
c Totals (add lines 3a	1	0]		10 096
and 3b)	, ,	, ,			4 TO 030"

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

Schedule F (Form 990) 2016

Page 2

Schedule F (Form 990) 2016 Women's Foundation of Minnesota 41–1635761

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)						0	Schedule F (Form 990) 2016
(h) Description of noncash assistance							Sched
(g) Amount of noncash assistance	0.				xempt by		
(f) Manner of cash disbursement	5,096,wire transfer				recognized as tax-e.		
(e) Amount of cash grant	5,096.				foreign country,		
(d) Purpose of grant	general operating				Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter		
(c) Region	South Asia - Afghanistan, Bangladesh, Bhutan, India,				is listed above that are is library and is library.	r entities	
(b) IRS code section and EIN (if applicable)					ecipient organization	other organizations o	
1 (a) Name of organization					2 Enter total number of r the IRS, or for which th	3 Enter total number of other organizations or entities	

41-1635761

Page 3

Women's Foundation of Minnesota

Schedule F (Form 990) 2016 Women's Foundation of Minnesota 41–1635761

Part III, Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

• I	ľ	I	İ	ì	İ	1	I	I	1	ıω
(h) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2016
(g) Description of noncash assistance										Sched
(f) Amount of noncash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										
(c) Number of (d) Amount of recipients cash grant										
(b) Region										
(a) Type of grant or assistance (b) Region										

Part IV Foreign Forms Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the 1 organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign X Yes No Corporation (see Instructions for Form 926) 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Yes X No Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Yes X No Certain Foreign Corporations (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund X Yes No. (see Instructions for Form 8621) 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Yes X No Foreign Partnerships (see Instructions for Form 8865) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Yes X No Instructions for Form 5713, do not file with Form 990)

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016 Women's Foundation of Minnesota	41-1635761	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	ting method, amounts of	
investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method)		1
(estimated number of recipients), as applicable. Also complete this part to provide any additional information of the complete this part to provide any additional information.		
Part I, Line 2:		
Prior to awarding funds to an overseas grantee, the Women	's Foundation	of
Minnesota requires an international grantee representation	n form as part	t
of the grant agreement letter, which indicates the use for	r which the	
		
funds are intended and includes a clause that dictates fun	nds to be	
returned if not used for their intended purpose.		
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

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

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

► Attach to Form 990.

2016 2016 Open to Publi	71	_		
	OMB No 1545-0047	2016	Open to Public	Inspection

ž [] **Employer identification number** 41-1635761 X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. of Minnesota Women's Foundation General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part II Part

recipient that received more than \$5,000. Part il can be duplicated if additional space is needed	\$5,000 Part II car	n be duplicated if addit	ional space is need	ped			
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							Better understanding the
Amherst H. Wilder Foundation							impact, strengths, &
451 Lexington Pkwy N							opportunities for
Saint Paul, MN 55104-4636	41-0693889	501(c)(3)	10,000.	0			improvement of the Safe
							To support a
Annex Teen Clinic							comprehensive health
5810 42nd Avenue N							education program
Robbinsdale, MN 55422	23-7236943	501(c)(3)	8,000.	0.			including teen pregnancy
Augsburg College							
2211 Riverside Avenue							
Minneapolis, MN 55454	41-0694721	501(c)(3)	10,000.	0			Jrban Arboretum Campaign
							To support Talking
Вадовелдаап							Circles in the White
2476 230th Street							Earth area which will
Маһпомеп, МN 56557	20-0990599	501(c)(3)	5,700.	0.			teach financial literacy
CaringBridge							
2750 Blue Water Road, Suite 275							
Eagan, MN 55121	42-1529394	501(c)(3)	10,000.	0			general operations
Casa de Esperanza				_			To support work that
PO Box 40115		_				<u>v</u> ,	creates conditions for
St. Paul, MN 55104	41-4114710	501(c)(3)	9,500.	.0			young women to thrive
Contract to the Column to the contract of the Column to the contract of the Column to the contract of the Column to the contract of the Column to the column		4+ 0. 6040. 000.402.000	noted to the line 4 toble				57

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

See Part IV for Column (h) descriptions 3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I (Form 990) (2016)

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Schedule (Form 990) Women's Foundation of Minnesota Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Foundation er Assistance to Gov	of Minnesota	ta nzations in the Ur	ited States (Sche	dule I (Form 990), Par		41-1635761 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(n) Purpose of grant or assistance
							To support a bilingual and culturally-relevant teen pregnancy prevention
Minneapolis, MN 55404 Comunidades Latinas Unidas En Servicio, Inc 797 East 7th Street - Saint Paul MN 55106	41-1386986	501(c)(3)	8 500.				program that includes To support work that creates conditions for Voung women to thrive
E Nicollet n Minnesota A MN 56082	41-6005852	County of Nicoll	.000,05	0			The following activities: 1) continue sting Operations throughout the three counties 2) focus
Dakota Wicohan 230 W. 2nd Street Morton, MN 56270	42-1552956	501(c)(3)	6,000	0			To support the Dakota Youth Leadership Program, a year-round out-of-school time youth
Dunwoody College of Technology 818 Dunwoody Boulevard Minneapolis, MN 55403	41-0693856	501(c)(3)	51,000.	.0			Helen Scharlemann scholarship fund
	23-7133742	501(c)(3)	8,000.	0			To support a school-based comprehensive sexual & reporductive health education porgram for
Friends of Saint Paul College 235 Marshall Ave Saint Paul, MN 55102-1807	27-1631689	501(c)(3)	112,000.	0			Women in Trade Careers at Saint Paul College will support 60 women who are low-income and/or women
Girl Scouts of Minnesota and Wisconsin River Valleys - 400 Robert Street S - St. Paul, MN 55107	41-0693910	501(c)(3)	13,300.	0			To support the Women of Distinction event
GroundSpark, Inc. 4104 24th Street, Suite 2013 San Francisco, CA 94114	83-0498854	501(c)(3)	20,000.	0			general operating Schedule I (Form 990)
							•

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the Onited States (Schedule I (Forti 990), Part III)	Assistance to Go	vernments and Organ	izations in the Or	nted States (Sche	dule i (Form 990), Par	t "i.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							GEMS (Girls EMpowerment)
Hope Community							program for girls of
611 Franklin Avenue E							color to increase their
Minneapolis, MN 55404	41-1292817	501(c)(3)	6,000.	0.			leadership and conduct
Immigrant Law Center of Minnesota							
450 Syndicate St N Ste 175							
Saint Paul, MN 55104	41-0909036	501(c)(3)	20,000.	0.			general operating
							To implement a
Independent School District #625							semester-long process at
360 Colborne Street			-				two high schools for
St Paul, MN 55102	41-0901311	city of St Paul	20,000	0		,	healthy adolescent male
							To support expanding SELF
Lutheran Social Service of							prgenancy prevention
Minnesota-St. Paul - 2485 Como							program for at-risk youth
Avenue - St. Paul, MN 55108	41-0872993	501(c)(3)	8,000.				especially teen girls who
							GRIP (Girls Restorative
Men as Peacemakers			-				Program)-expanding
205 West 2nd Street, Suite 15							leadership opportunities
Duluth, MN 55802	41-1841689	501(c)(3)	56,000.	0.			and skill buidling for
Minnesota African Women's							To support an adapted
Association (MAWA) - 3300 County							Becoming a Responsible
Road 10 Ste 510 - Brooklyn Center,							Teen curriculum to
MN 55429	48-1259139	501(c)(3)	12,000.	0.			increase skills of
Winnesote Dublic Bedio							52-week abongorahin
Cedar Str				•			package on the Bracewide
St. Paul, MN 55101-2230	41-0953924	501(c)(3)	52,000.	0			news network
							To support the EMPOWER
Minnesota State Colleges &							program at Hibbing
Universities - 30 7th St E Ste 350							Community College which
- Saint Paul, MN 55101-4812	23-7003904	State of MN	129,500.	0.			will enroll
							Serving Minnesota women
Minnesota State Community &							of color & low-income
Technical College - 1900 28th							women in Engineering and
Avenue S - Moorhead, MN 56560	41-1687554	State of MN	100,000.	0.			Technology programs at
							Schedule I (Form 990)

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Schedule I (Form 990) Women's Foundation of Minnesota Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Foundation er Assistance to Go	of Minnesota	ta nizations in the Ur	nted States (Sche	dule I (Form 990), Par	41	1-1635761 Page 1
1	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nonviolent Peaceforce 2610 University Avenue West St. Paul, MN 55114	35-2197019	501(c)(3)	25,000.	,0			general operating
Normandale Community College Foundation - 9700 France Ave S - Bloomington, MN 55431	41-1295802	501(c)(3)	10,000.	, o			Annual Gala
Options Fund, Inc. PO Box 473 Eau Claire, WI 54702-0473	39-1989709	501(c)(3)	25,000.	.0			general operating
Outfront Minnesota 310 E 38th St, Ste 204 Minneapolis, MN 55409	36-3550489	501(c)(3)	8,500,	0.			general operating
Peacemaker Resources 3124 Hannah Avenue Bemidji, MN 56601	45-0507287	501(c)(3)	10,000.	0			Work that creates conditions for young women of Northern Minnesota to thrive & for
PFund 2801 21st Ave South Suite 132B Minneapolis, MN 55407	36-3567019	501(c)(3)	7,500.	0			general operating
Pillsbury United Communities 414 South Eighth Street Minneapolis, MN 55404	41-0916478	501(c)(3)	7,000.	.0			Supporting community conversations on gun violence in honor of Sylvia Martinez
Planned Parenthood MN, ND, SD, Action Fund - 671 Vandalia Street - St. Paul, MN 55114	41-0948382	501(c)(3)	60,000.	0.			general operating
Pro-Choice Resources 528 Hennepin Avenue Suite 600 Minneapolis, MN 55403	41-0971333	501(c)(3)	. 000 , 990 .	0			general operating
							Schedule I (Form 990)

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(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of valuation nor ganization or government (f) Method of	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project Diva 2620 Kenzie Terrace Suite 227	0.00						Skill building & coaching to develop positive life goals for African
Project FINE							
Winona, MN 55987	41-1883675	501(c)(3)	6,000.	0.			beyond) program to better reflect the current needs
Purple 222 Leslie Street Lansing, MI 48912	46-2649125	501(c)(3)	10,000.	0		1	To support We Want The Land Coalition
Regents of the University of Minnesota - 301 19th Avenue South - Minneapolis, MN 55455	41-6007513	State of MN	275,452.	0			general operating
Region 9 Development Commission PO Box 3071 Mankato, MN 56002	06-1666219	501(c)(3)	6,000.	0.			To support SURGE program in enhancing financial literacy & career development,
Southside Family Charter School 4500 Clinton Avenue S Minneapolis, MN 55419	41-1253375	501(c)(3)	14,917.	0			general operating
State of Minnesota 658 Cedar St 400 Centennial Office St Paul, MN 55155	41-6007162	State of MN	15,000.	0			To support a training program for criminal justice professionals from across Minnesota to
The Advocates for Human Rights 330 2nd Ave S Ste 800 Minneapolis, MN 55401-2447	36-3292374	501(c)(3)	20,000.	0			general operating
The Brainerd Baxter Youth Center 723 Washington Street Brainerd, MN 56401	27-2547560	501(c)(3)	6,000.	0			Plan healthy youth development program for middle to high school girls.
							Schedule I (Form 990)

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Women's Foundation of Minnesota		on of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)
Foundat		er Assistance
Women's		of Grants and Oth
Schedule 1 (Form 990)	7000 11000 1000	Part II Continuation

The Panily Partnership 115 Eth Eth Eth Eth Eth Eth Eth Eth Eth Eth	(a) Name and address of (b) EiN (c) IRC section organization or government (a) Amount of (book, FMV, assistance appraisal, other)	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
No. No.	Family							Continuing legislative advocacy efforts to
Anneapolls Foundation Street S SE8 800 Solie, MNS 55405 Solie)(3) 61,415, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	S 8th St neapolis, MN	41-0693858	501(c)(3)	50,000	0			attain full funding of Minnesota's Safe Harbor
Street Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State Stee No. State State Stee No. State State Stee No. State State Stee No. State State Stee No. State State Stee No. State State Stee No. State State Stee No. State State Stee No. State State State Stee No. State State Stee No. State State State Stee No. State S	The Link							To support work that
March Marc	1210 Glenwood Avenue							creates conditions for
Street S Ste 800 Street S Ste 800 Oblie, MN 55402-2100 41-6023402 501(c)(3) 5,500. 0. 0. general and state of the street S Ste 800 Ilin Foundation Illn Foundation Illn Foundation MN 55424 MN 55424 MN 55424 MN 55424 MN 55424 MN 55424 MN 55426 MN 55424 MN 55426	MN 5540	41-1920649	501(c)(3)		0.			young women to thrive.
11.1 Foundation	The Minneapolis Foundation 80 8th Street S Ste 800 Minneapolis, MN 55402-2100	41-6029402	501(c)(3)		0			general operating
### 55424 ### 55424 ### 55424 ### 55424 ### 55424 ### 55424 ### 55424 ### 55424 ### 55423 ### 55424 ### 55423 ### 56423	The Wallin Foundation 5200 Wilson Rd							
### String of St	MN	41-6283068	501(c)(3)		0.			general operating
Ington Area Women's Foundation H Street, NW, Suite 1000 122-2028612 501(c)(3) 29,525. 0. Logrow, DC 20005 Logrow, DC 20005 Logrow, Breat Broadway Suite 110 71-0956749 501(c)(3) 8,000. 0. Side Community Health Licse - 153 Cesar Chavez Street Prospecial Annotation, Inc. South Saratoga Street 41-0888137 501(c)(3) 8,500. 0. Prosperiistriation Frosperiistriation Frosperiistri	The National Crittenton Foundation 1750 SW Harbor Way, #450 Portland, OR 97201	54-0505932	501(c)(3)	20,000.	0			Girls © the Margin Alliance
H Street, NW, Suite 1000 H Street, NW, Suite 1000 ington, DC 20005 to Grow West Broadway Suite 110 To Grow West Broadway Suite 110 To Grow West Broadway Suite 110 To Grow West Broadway Suite 110 To Grow West Broadway Suite 110 To Grow Side Community Health To Grow Side Community Health To Grow Side Community Health To Grow	Washington Area Women's Foundation							
to Grow West Broadway Suite 110 West Broadway Suite 110 Sapolis, MN 55411 Side Community Health Side Community Action, Inc. For South Seratoga Street S		52-2028612	501(c)(3)		0			Prosperity Together Initiative
to Grow West Broadway Suite 110 A1-0956749 501(c)(3) 8,000. Side Community Health ices - 153 Cesar Chavez Street Paul, MN 55107 Such Community Action, Inc. South Saratoga Street South Saratoga Street A1-0888137 501(c)(3) 8,500. O. B,000. Community Health A1-0888137 501(c)(3) B,500. Community Health A1-0888137 501(c)(3) B,500. Community Health A1-0888137 501(c)(3) B,500. Community Action A1-0888137 501(c)(3) B,500. Community Health A1-0888137 501(c)(3) B,500. Community Action A1-0888137 501(c)(3) B,500. Community Health A1-0888137 501(c)(3) B,000. Community Health A1-0888137 501(c)(3) B,000. Community Health A1-0888137 501(c)(3) B,000. Community Health A1-0888137 501(c)(3) B,500. Community Health A1-0888137 501(c)(3) B,000. Communit								To support DreamTracks
MN 55411 71-0956749 501(c)(3) 8,000. 0. -21 to mmunity Health Foregram program 53 Cesar Chavez Street 23-7156236 501(c)(3) 8,000. 0. pregnancy MN 55107 23-7156236 501(c)(3) 8,000. 0. To support anatoga Street 41-0888137 501(c)(3) 8,500. 0. young won	to Grow West Broadway Suits							teen parenting program for vound mothers ages 15
mmunity Health To suppoor 53 Cesar Chavez Street 23-7156236 501(c)(3) 8,000. 0. pregnance MN 55107 0. includin includin unity Action, Inc. aratoga Street Creates saratoga Street 41-0888137 501(c)(3) 8,500. 0. young wo	MN 55411	71-0956749	501(c)(3)	•	0			
Community Health - 153 Cesar Chavez Street 1, MN 55107 ommunity Action, Inc. h Saratoga Street h Saratoga Street MN 56258 A1-0888137 501(c)(3) R,000 0. program p								To support Health Start
1, MN 55107 23-7156236 501(c)(3) 8,000. 0. including inc	West Side Community Health							program services & teen pregrams prevention
ommunity Action, Inc. h Saratoga Street MN 56258 41-0888137 501(c)(3) 8,500. 0.	1) MN 55107	23-7156236	501(c)(3)	8,000.	0.			including long-acting
h Saratoga Street						- ·		To support work that
MN 50236 41-066813/ 501(5)(3) 6,300.	h Saratoga Stree	0000		6	C			creates conditions for
	ZE	41-0888137	DOT(C)(3)	8,500.				Pouris Nomen to this 1/2000

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Schedule I (Form 990) Women's Foundation of Minnesota Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Foundation or Assistance to Gov	of Minnesota	nizations in the Ur	nited States (Sche	dule I (Form 990), Par		41-1635761 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Women's Health Center of Duluth, P.A 32 E 1st St Ste 300 - Duluth, MN 55802-3002	41-1444270	501(c)(3)	10,000.	.0			abortion access fund
Women's Initiative for Self Empowerment - Hamline Park Plaza 570 Asbury Street Ste 202 - St Paul, MN 55104	41-1791358	501(c)(3)	8,500.	.0			To support work that creates conditions for young women to thrive
YouthCARE 2701 University Avenue SE Ste 205 Minneapolis, MN 55414	41-1322470	501(c)(3)	8,500.	0			To support work that creates conditions for young women to thrive
YWCA of Duluth 32 East 1st Street, Suite 202 Duluth, MN 55802	41-0696493	501(0)(3)	6,000.	0			To support Girl Power! program where girls will serve as community researchers to guide
YWCA of Minneapolis 1130 Nicollet Mall Minneapolis, MN 55403	41-0693891	501(c)(3)	11,500.	.0			It's Time to Talk 2016
YWCA of St. Paul 375 Selby Avenue St. Paul, MN 55102-1822	41-0693892	501(c)(3)	113,066.	.0			To deliver leadership development programs for Young Women's Initiative of Minnesota
							Schedule I (Form 990)

Schedule I (Form 990) (2016)

Column (h):

line 1,

Part II

632102 11-01-16

Name of Organization or Government: Amherst H. Wilder Foundation

(h) Purpose of Grant or Assistance: Better understanding the impact, strengths, & opportunities for improvement of the Safe Harbor model & law through a statewide web survey. The survey will be the largest & most comprehensive data collection activity for the program evaluation to date.

Name of Organization or Government: Annex Teen Clinic

(h) Purpose of Grant or Assistance: To support a comprehensive health education program including teen pregnancy prevention in classroom & community settings in North Minneapolis & Northwest Hennepin County

Name of Organization or Government: Bagosendaan

(h) Purpose of Grant or Assistance: To support Talking Circles in the
White Earth area which will teach financial literacy through starting a
book/learning materials business as well as provide layered mentoring &
community & cultural involvement.

Name of Organization or Government: Centro Tyrone Guzman

(h) Purpose of Grant or Assistance: To support a bilingual and culturally-relevant teen pregnancy prevention program that includes parent engagement

Name of Organization or Government: County of Nicollet

(h) Purpose of Grant or Assistance: The following activities: 1)

continue sting operations throughout the three counties 2) focus more on

investigations involving the supply side of sex trafficking 3) continue

to expand training opportunities in this area for local law enforcement

Name of Organization or Government: Dakota Wicohan

(h) Purpose of Grant or Assistance: To support the Dakota Youth

Leadership Program, a year-round out-of-school time youth program in the

Lower Sioux area which empowers Dakota youth and prepares culture

bearers, positively connecting them to their community while grounding

them in their Dakota heritage

Name of Organization or Government: Family Tree Clinic

(h) Purpose of Grant or Assistance: To support a school-based comprehensive sexual & reporductive health education porgram for low-income students in St. Paul

Name of Organization or Government: Friends of Saint Paul College

(h) Purpose of Grant or Assistance: Women in Trade Careers at Saint Paul

College will support 60 women who are low-income and/or women of color.

This cohort will persist through pathways leading to middle-skilled

trades employment receiving comprehensive support through scholarships

Name of Organization or Government: Hope Community

(h) Purpose of Grant or Assistance: GEMS (Girls EMpowerment) program for girls of color to increase their leadership and conduct youth participatory action research on economic prosperity.

Name of Organization or Government: Independent School District #625

(h) Purpose of Grant or Assistance: To implement a semester-long process
at two high schools for healthy adolescent male development to reduce
objectification of women, and to reduce demand for sexual exploitation.

Schedule i (Form 990)

school & avoid second pregnancy

parenting program for young mothers ages 15 - 21 to graduate from high

Schedule (Form 990) Women's Foundation of Minnesota	41-1635761	Page 2
Part IV Supplemental Information		
Name of Organization or Government: West Side Community Hea	alth Services	s
(h) Purpose of Grant or Assistance: To support Health Start	t program	
services & teen pregnancy prevention including long-acting	reversible	
contraceptives for vulnerable high-risk populations	·	
		
Name of Organization or Government: YWCA of Duluth		
(h) Purpose of Grant or Assistance: To support Girl Power!	program when	re
girls will serve as community researchers to guide program	development	&
implementation.		
		
		
		
		
		

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

Department of the Treasury

Part I

Women's Foundation of Minnesota

Employer identification number 41-1635761

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			Ι.
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			. 1
	Discretionary spending account 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	1b		
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?	2		
		*	/4	•
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		*	1
	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.			
	X Compensation committee	. 4	,	» ·
	X Independent compensation consultant X Compensation survey or study	٠ *	, ,	` .
	X Form 990 of other organizations X Approval by the board or compensation committee	2 ,		,
		*		٧.
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			,
а	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
С	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			1
	contingent on the revenues of.			
а	The organization?	5a		X
þ	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			
а	The organization?	6a		<u>X</u>
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	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	.		
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016 Women's Foundation of Minnesota 41-1635761

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2016

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

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

	(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	ISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	F.
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(ı)(a)	in column (B) reported as deferred on prior Form 990
(1) Lee Roper-Batker	(i) 221,234	. 10,000.	9,950.	15,203.	2,550.	258,937.	0
President/CEO (i	(ii) 0 ·				0	0	0
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SCHEDULE M (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

Schedule M (Form 990) (2016)

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30,

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

Open To Public Inspection

Women's Foundation of Minnesota 41-1635761 Types of Property Part I (d) (a) (b) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property X 450,328.selling price of sto 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests 12 Securities - Miscellaneous Qualified conservation contribution -Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other Other 26 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part 1, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for X exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II. Х 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA

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

Schedule M	(Form 990) (2016) Women's Foundation of	Minnesota	41-1635761	Page 2
Part II	Supplemental Information. Provide the information requires reporting in Part I, column (b), the number of contributions, the this part for any additional information.	jured by Part I, lines 30b, 32b, and 33, ne number of items received, or a comb	and whether the organization	n
				
				
				

SCHEDULE 0

(Form 990 or 990-EZ)

kind in the nation.

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 Inspection

Name of the organization

Women's Foundation of Minnesota

Employer identification number 41-1635761

Form 990, Part III, Line 2, New Program Services: In August 2016, the Women's Foundation of Minnesota signed a Memorandum of Understanding with Governor Mark Dayton to co-lead the Young Women's Initiative of Minnesota (YWI MN), a \$9 million, seven-year cross-sector initiative led by the Foundation and the Governor's Office of the State of Minnesota in partnership with nonprofits, businesses, government, philanthropies, and young women (ages 12-24). The Initiative was formally launched at a press conference on October 25, 2016. This is the first statewide initiative and public-private partnership of its

We are mobilizing partners to build pathways to economic opportunity, improve safety and well-being, and promote a state of respect for young women from communities that experience the greatest disparity in outcomes: African American, African Immigrant, American Indian, Asian American & Pacific Islanders, Latina, Greater Minnesota, LGBTQ youth, and Disabilities.

Through community listening sessions and research, young women in these communities developed a statewide Blueprint for Action. YWI MN will implement the Blueprint through grantmaking, strategic communications, research, policy, and partnerships. Young women will serve as key advisors and drivers throughout the Initiative. When young women do better, families and communities do better, and Minnesota does better.

High School Graduation: girlsBEST participants have a 93% high

Name of the organization Women's Foundation of Minnesota	Employer identification number 41-1635761
school graduation rate, compared to 50-83% in Minnesota o	verall,
depending on ethnicity.	
2. Post-Secondary Enrollment: girlsBEST participants have	a 90%
post-secondary education enrollment, compared to 44-72% i	n Minnesota
overall, depending on ethnicity.	
3. Teen Pregnancy: girlsBEST participants have a teen pre	gnancy rate of
less than 1 per 1,000, compared to 18-48 per 1,000 in Min	nesota
overall, depending on ethnicity.	
In fiscal year 2017, the Women's Foundation of Minnesota	wrapped up its
fourth cohort of girlsBEST on July 31, 2016, and awarded	\$150,000 in
girlsBEST Fund planning grants to 28 organizations in Oct	ober 2016.
Each new girlsBEST cohort begins with planning grants. Th	e planning
grant period was October 15, 2016 to April 14, 2017.	
Innovation Fund	
Through the Innovation Fund, the Foundation provides gene	ral operating
funding to organizations that drive gender equity in Minn	esota. Because
gender inequity looks different in every community, we us	e our
Intersectional Lens Framework to look at how gender, rac	e, place
(geography), and equity (class, age, ability, LGTBQ, immi	gration
status) intersect in order to target the most innovative	solutions to
build greater gender equity. Priority is given to organiz	ations that
ensure women's safe and healthy lives.	-
In fiscal year 2017, the Women's Foundation of Minnesota	awarded
\$100,000 to three organizations through the Innovation Fu	nd.

counties, is co-chair of the Anti-Sex Trafficking Planning Committee
for Super Bowl LII (Minneapolis 2018). The Foundation has been involved
with the Super Bowl Planning Committee during the past year to discuss
sex trafficking and violence against women and girls during national
sporting events and partnered with cross-sector leaders to create this
sub-committee to elevate the issue and coordinate the Twin Cities'
response. The work is underway to create a comprehensive cross-sector
plan to combat sex trafficking during the Super Bowl - and serve as a
national model approach for other sporting and large events. Much of
the model is based on our successful cross-sector MN Girls campaign.

increase resources for girls and women across Minnesota with the greatest disparities in outcomes. The Foundation partnered with the White House Council on Women and Girls and NoVo Foundation to conduct the listening sessions.

Sex Trafficking Research

Mapping the Demand for Sex with Trafficked Individuals in Minnesota, the second in a series of research reports commissioned and funded by the Foundation and produced by the University of Minnesota, will be released in Summer 2017. The new research focuses on the buyers who drive the market for sex trafficking: who they are, how they enter the market, and their relationship to sex trafficking operations. This project will generate new empirical data to shape early prevention and intervention activities. The research will result in actionable information that can be used to support current law enforcement practices combating sex trafficking. The first report in the series, Mapping the Market for Juvenile Sex Trafficking in Minneapolis, was released in September 2014.

Sex Trafficking and the 2018 Super Bowl in Minneapolis: A Research
Brief

The Foundation commissioned the University of Minnesota to conduct a research brief focused on the review of available scholarly literature on the connections between sex trafficking and Super Bowls, and a review of media coverage in the United States related to this topic.

Findings revealed that while the Super Bowl does temporarily increase the number of online ads for commercial sex in the host city, it does not stand out in this sense from other large events, such as trade shows and other sporting events. Sex trafficking is not a special event: it happens everywhere, 365 days a year. We will leverage Super Bowl LII as a platform to increase resources and attention on this issue, and together with cross-sector leaders, create a replicable

The Foundation engages in collaborative funding and partnerships within Minnesota Council on Foundations' programs. We are a member of several funder collaboratives, including the Start Early Funders Coalition for Children and Minnesota's Future, MinneMinds, Northside Funders Group, Somali Funders Coalition, and the Workforce Development Funders Collaborative, offering a gendered perspective at those tables.

National Partnerships

^{*} Founding member of the National YWI Funders Collaborative, a learning

- * Engaged two Wenda Weekes Moore Interns to create a pipeline of leadership opportunities for women of color in philanthropy and nonprofits.
- * As of 3/31/17, the Foundation has 50 Donor Advised Funds, which is an

December 31, 2017.

increase of 7 from the previous year. The combined assets of all donor advised funds totals: \$5,956,548.

* We hosted 3 gatherings in FY17 for donor advisors providing information on both local and international funding opportunities for their consideration.

Form 990, Part VI, Section A, line 1:

The Executive Committee is comprised solely of the officers of the board of trustees. The Executive Committee shall have the authority of the Board of Trustees in the management of the business of this Foundation in the interval between meetings of the Board of Trustees and such other authority as is delegated by the Board of Trustees by resolution. As required, the Executive Committee shall have responsibility for overseeing and responding to personnel matters of the Foundation.

Form 990, Part VI, Section B, line 11b:

The Foundation's Audit Committee will review and recommend approval. Each trustee will receive a copy of the Form 990 for review and approval prior to filing.

Form 990, Part VI, Section B, Line 12c:

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

determining the presence of a quorum and may not vote.

Form 990, Part VI, Section B, Line 15:

Compensation for all positions, including the CEO, is determined annually based on documented performance reviews and consistent with periodic comparability studies. During fiscal year 2013, the Foundation retained an outside consultant to review the salary of each position compared with other nonprofit organizations and foundations of comparable size and purpose. Changes in CEO compensation are recommended by the Chair and Vice Chair, reviewed by the Executive Committee and approved by the full Board.

Form 990, Part VI, Section C, Line 19:

The Foundation makes its governing documents, conflict of interest policy and financial statements available upon request.

Form 990, Part III, Program A:

Young Women's Initiative of Minnesota

In October 2016, we launched the Young Women's Initiative of Minnesota (YWI MN), a \$9 million, seven-year cross-sector initiative led by the Foundation and the Governor's Office of the State of Minnesota in partnership with nonprofits, businesses, government, philanthropies, and young women (ages 12-24). The Foundation will invest in research, grantmaking, policy, strategic communications, and evaluation to increase equity in opportunities and outcomes for Minnesotans with the greatest disparities: young women of color, American Indian young women, young women from Greater Minnesota, LGBTQ youth, and young women with disabilities.

The YWI MN is anchored in our values, principles, and vision to create a world of equal opportunity where women and girls - and all people - hold the power to create and lead safe, prosperous lives. It builds on the work we have done already and continue to do through all our funds and leverages the best of what we have learned through our MN Girls campaign: cross-sector partnerships are critical for deeply affecting systemic changes.

In August 2016, the Foundation signed a memorandum of understanding with Governor Dayton to co-lead the YWI MN. The Initiative was formally launched at a press conference on October 25, 2016. This is the first statewide initiative and public-private partnership of its kind in the nation.

Designed to be as participatory and inclusive as possible, the YWI MN is comprised of three core committees that drive the work:

Community-Specific Working Groups, the Young Women's Cabinet, and the Young Women's Initiative of Minnesota Council. Through a community-specific participatory research process, the YWI MN will deliver a statewide Blueprint for Action in 2017 that will create the conditions for young women in Minnesota to achieve equity in outcomes and lead safe, prosperous lives.

In fiscal year 2017, the Women's Foundation of Minnesota awarded \$382,543 in YWI MN grants to nine organizations.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990.

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

2016 Open to Public Inspection

OMB No 1545-0047

Schedule R (Form 990) 2016 (g) Section 512(b)(13) Employer identification number 41-1635761 N₀ controlled entity? Direct controlling Yes entity 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. Direct controlling entity End-of-year assets **e** status (if section Public charity 501(c)(3)) <u>e</u> Total income Exempt Code O section Ŧ Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) Women's Foundation of Minnesota Primary activity Primary activity <u>a</u> For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) of disregarded entity Name, address, and EIN of related organization Part | Part II

41-1635761

Schedule R (Form 990) 2016 Women's Foundation of Minnesota

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. Part III

(a)	Ð	<u></u>	<u>©</u>	(e)	£	(B)	Ξ	8	8	¥
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year	Disproportionate allocations?	Code V-UBI amount in box	General or managing partner?	General or Percentage managing ownership partner?
		country)		sections 512-514)		anner a	Yes No	K-1 (Form 1065)	Yes No	
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Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year	ganizations Taxable a	as a Corpo	ration or Trust. Co	ion or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related	on answered "Yes	" on Form 990, Pa	art IV, line 3	4 because it had or	ne or mo	e related

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(a)	(g)	<u></u>	(0	(e)	£	(6)	<u> </u>	Ξ	_ :
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling Type of entity (C corp, S corp,	Type of entity (C corp, S corp, or trust)	ઌૢ૿	Share of end-of-year	g d	Section 512(b)(13) controlled entity?	(13) y? y?
		country)		Of titlesty		gasers		Yes	No
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Charitable Remainder Trust (2)		MN	N/A	TRUST	N/A	N/A	N/A		×
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Schedule R (Form 990) 2016

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

				}		1
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ş
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?	s with one or more re	iated organizations listed	ın Parts II-IV?		+	~
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				Ē	7	×
 b Gift, grant, or capital contribution to related organization(s) 				₽		×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan quarantees to or for related organization(s)				9		×
					\dagger	>
 Loans of loan guarantees by related organization(s) 				۽	+	اه
				_		
f Dividends from related organization(s)				*		×
a Sale of assets to related organization(s)				9	-	×
					+	
				=		4
i Exchange of assets with related organization(s)				=		×ا
 Lease of facilities, equipment, or other assets to related organization(s) 				=		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
1 Performance of services or membership or fundraising solicitations for related organization(s)	inization(s)			F		×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			3		×
n Sharing of facilities equipment mailing lists or other assets with related organization(s)	(a) (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c			Ę	+	×
	(6)10				1	ډا،
 Sharing of paid employees with related organization(s) 				٥	1	اه
p Reimbursement paid to related organization(s) for expenses				. 4		×
				;	f	>
				-	1	اه
				!	-	
 Other transfer of cash or property to related organization(s) 				÷	┥	×
s Other transfer of cash or property from related organization(s)				1s	×	
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.	who must complete th	is line including covered	relationships and transaction thresholds.			
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(a) Name of related organization	(b) Transaction	(c) Amount involved	(a) Method of determining amount involved	volved		
	type (a-s)					-
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) (c) (d) (d)	(g)	(9)	(a) (b)	(4)	(B)	3	8	3	3
Name, address, and EIN of entity	Primary activity	micile	Predominant income pariners sec (related, unrelated, 50(te)(3)	<u>ي</u> ب	Share of end-of-year	7 5	Cod	General (managin	Percentage 9 ownership
		country)	sections 512-514) Yes No		assets	Yes No	(Form 1065)	Yes No	
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