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)

2018

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A F	or the	= 2018 calendar year, or tax year beginning $$ NOV $$ $$ $$ 1 $$ $$ $$ $$ 2 $$ 0 $$ 1 $$ $$ and er	nding C	CT 31, 2019						
B c	heck if pplicabl	C Name of organization		D Employer identifi	cation number					
X	Addre	e THE MIDWAY MEN S CLOB								
	Name chang	Doing business as		41-1	842630					
느]Initial return ∏Final	Number and street (or P.0 box if mail is not delivered to street address) P.O. BOX 4181	E Telephone numbe	587-6174						
L.,	return، termın			G Gross receipts \$	435,283.					
	ated Ameno return		d							
	Application	F Name and address of principal officer PATRICIA M. FRANKEN	FIELD	H(a) Is this a group re for subordinates	[T]					
	pendi	SAME AS C ABOVE	- pq	H(b) Are all subordinates i	ncluded? Yes No					
		empt status 501(c)(3)X 501(c) (4) ◀ (insert no.) 4947(a)(1) or	627	1	list (see instructions)					
		te: N/A	1	H(c) Group exemption						
	_	organization: X Corporation	L Year	of formation: 1941	M State of legal domicite, MN					
Pa	rt I	Summary Briefly describe the organization's mission or most significant activities TO PRO	OMOTE	COCTAL CI	ד תווא א מוויים די					
Se	1	ATHLETIC ACTIVITIES IN THE MIDWAY AREA OF	ST.	PAUL MINNE	SOTA. THE					
Activities & Governance		Check this box If the organization discontinued its operations or dispose								
ver		Number of voting members of the governing body (Part VI, line 1a)	JG 01 111010	3	11					
õ		Number of independent voting members of the governing body (Part VI, line 1b)		4	11					
SS.		Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	0					
vitie		Total number of volunteers (estimate if necessary)		6	350					
cţį		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
۹	b	Net unrelated business taxable income from Form 990 T, line 38		7b	0.					
				Prior Year	Current Year					
ē	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	345.	389.					
Revenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>	367,530.	434,117.					
ş	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	\vdash	0.	0.					
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,578.	777.						
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		370,453.	435,283.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	114,273.	113,792.					
		Benefits paid to or for members (Part IX, column (A), line 4)	\vdash	15,850.	13,850.					
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	13,830.	0.					
en		Professional fundraising fees (Part IX, column (A), line 11e)	o. \vdash	0.	•					
Ĕ		Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11a-11a-41; 24/ED	∵ ⊢	224,961.	265,036.					
	17 18	Total expenses Add lines 13-17 (must equal Park Excellents (A), file 25)		355,084.	392,678.					
		1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	15,369.	42,605.					
- S		Revenue less expenses Subtract line 18 from line 12 Total assets (Part X, line 16)	Ве	ginning of Current Year	End of Year					
Net Assets Fund Balant	20	Total assets (Part X, line 16)		296,123.	338,728.					
d Bis	21	Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from Medic EN, UT Signature Block		0.	0.					
웬	22_	Net assets or fund balances Subtract line 21 from Thexe		296,123.	338,728.					
_	ırt II	Signature Block								
	er pena	ilties of perjury, I declare that I have examined this return, including accompanying schedules a			y knowledge and belief, it is					
rue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer							
		Signature of officer 'Signature of officer'		Date 1	12020					
Sigr		PATRICIA M. FRANKENFIELD, TREASURER		Date						
Her	е	Type or print name and title								
		Print/Type preparer's name Preparer's signature		Date Check	PTIN					
Paid	ı	WYLIE R. KLAWITTER Wille RKlawtton	-	7/10/2020 If self-employ	P01816942					
	arer	Firm's name BWK ROGERS PC		Firm's EIN	27-1375413					
	Only	Firm's address 431 SOUTH 7TH STREET, SUITE 2424	<u>-</u>							
		MINNEAPOLIS, MN 55415		Phone no.61	2-332-5446					
Мау	the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					
		1-18 LHA For Paperwork Reduction Act Notice, see the separate instruction	16		Form 990 (2018)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

		1842630	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission TO PROMOTE SOCIAL, CULTURAL, AND ATHLETIC ACTIVITIES IN THE AREA OF ST. PAUL, MINNESOTA. THE PRESCRIBED NEIGHBORHOOD IS	LOCATED	
	"MIDWAY" BETWEEN DOWNTOWN ST. PAUL AND DOWNTOWN MINNEAPOLIS	AND IS	A
	LARGE URBAN AREA.	-	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		[1 2]
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O		X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measu		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses,	and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 342,672. Including grants of \$ 113,792.) (Revenue \$		89 4.)
	THE MIDWAY MEN'S CLUB PURPOSE IS TO PROMOTE SOCIAL, CULTURA		
	ATHLETIC ACTIVITIES IN THE MIDWAY AREA OF ST. PAUL, MINNESO	TA. THE	
	PRESCRIBED NEIGHBORHOOD IS LOCATED "MIDWAY" BETWEEN DOWNTOW	N ST. PA	UL
	AND DOWNTOWN MINNEAPOLIS AND IS A LARGE URBAN AREA. THE CLU	B OPERAT	ES A
	STAND AT THE MINNESOTA STATE FAIR, WHICH RUNS 12 DAYS EACH	SUMMER	
	THROUGH LABOR DAY. THE STAND IS RUN BY UNPAID VOLUNTEERS AN		
	SWEET ROLLS, DONUTS, HOT DOGS, HAMBURGERS, BEER, BRATWURSTS		
	ITALIAN PORK SANDWICHES, AND SOFT DRINKS. AFTER EXPENSES OF		NC
	THE STAND ARE PAID, ALL PROCEEDS ARE DISTRIBUTED THROUGHOUT		
			10
	NEIGHBORHOOD YOUTH GROUPS, MAINLY FOR SPORTS EQUIPMENT, SPO	KID	
	ACTIVITIES, AND OTHER YOUTH ACTIVITIES.		
	46.042		
4b	(Code) (Expenses \$ 46,913 · including grants of \$) (Revenue \$)
	MONTHLY MEMBERSHIP MEETINGS ARE HELD TO REPORT ON THE PROGR		
	DISTRIBUTIONS AND ARE THE FORUM THROUGH WHICH VARIOUS YOUTH		
	APPLY FOR FUNDS. IN ADDITION, FOUR SOCIAL GATHERINGS ARE HE		HE
	MEMBERS EVERY YEAR, AS THANKS FOR THEIR WORK AT THE STATE F	AIR.	
			
		• • • • • • • • • • • • • • • • • • • •	
	- Automatical Control of the Control		
			
4c	(Code) (Expenses \$) (Revenue \$))
			
		 .	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 389,585.		
		Form 9	90 (2018)

Form 990 (2018) THE MIDWAY M
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	- 6		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>'</u>		
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
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		х
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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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		Х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	•	Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	:		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	44.		х
4-	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		Λ
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		Х
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	\vdash	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\vdash	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	\vdash	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
	domestic government on Fart IA, Column (A), line Frit Tes, Complete Schedule I, Farts Farto II	<u> </u>	المثثا	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		١.,
	Schedule J	23	1	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	i		1
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			١.,
	Schedule K If "No,",go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	—
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	İ		
	any tax-exempt bonds?	24c	<u> </u>	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		ľ	l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	-		ľ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			1
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1		
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			İ
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
_	(gambling) winnings to prize winners?	1c	Х	L

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Par	Statements Regarding Other IRS Fillings and Tax Compliance (continued)										
			Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>							
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_		77							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a	·	X							
b	If "Yes," enter the name of the foreign country										
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			$\overline{\mathbf{x}}$							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c									
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5 C									
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a									
	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).	<u> </u>	-								
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required										
	to file Form 8282?	7c		Х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f									
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the										
	sponsoring organization have excess business holdings at any time during the year?	8									
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter										
a	Initiation fees and capital contributions included on Part VIII, line 12			1							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b] -										
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders										
	Gross income from other sources (Do not net amounts due or paid to other sources against										
J	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									
	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.										
	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note. See the instructions for additional information the organization must report on Schedule O	-		2							
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	-									
С	Enter the amount of reserves on hand										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a]	Х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or										
	excess parachute payment(s) during the year?	15		<u> </u>							
	If "Yes," see instructions and file Form 4720, Schedule N			لبب							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> X</u>							
	If "Yes," complete Form 4720, Schedule O		agn /	10040							

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

	Check if Schedule O contains a response or note to any line in this Part VI			X									
Sec	tion A. Governing Body and Management												
			Yes	No									
1a	Enter the number of voting members of the governing body at the end of the tax year 11												
	If there are material differences in voting rights among members of the governing body, or if the governing	1											
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.												
b	Enter the number of voting members included in line 1a, above, who are independent 1b 11												
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ľ											
_	officer, director, trustee, or key employee?												
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision												
Ū	of officers, directors, or trustees, or key employees to a management company or other person?												
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?												
5													
6	Did the organization have members or stockholders?	5 6	Х	Х									
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	۰											
7 4	more members of the governing body?	7a	x										
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>'</u> "											
	persons other than the governing body?	7b		Х									
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	۳-											
	The governing body?	8a	$\overline{\mathbf{x}}$										
	Each committee with authority to act on behalf of the governing body?	8b	X										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	05	<u> </u>										
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х									
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)												
000	tion b. I divided (mis decitor b requests information about policies not required by the internal revenue dode)		Yes	No									
10a	Did the organization have local chapters, branches, or affiliates?	10a		X									
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100											
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b											
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?												
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X									
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b											
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe												
	ın Schedule O how this was done	12c											
13	Did the organization have a written whistleblower policy?	13		Х									
14	Did the organization have a written document retention and destruction policy?	14		Х									
15	Did the process for determining compensation of the following persons include a review and approval by independent												
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?												
а	The organization's CEO, Executive Director, or top management official	15a		$\overline{\mathbf{x}}$									
	Other officers or key employees of the organization	15b		Х									
_	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	, i											
	taxable entity during the year?	16a		X									
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	<u> </u>											
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	ļ '		'									
	exempt status with respect to such arrangements?	16b											
Sec	tion C. Disclosure												
17	List the states with which a copy of this Form 990 is required to be filed ► NONE												
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only	availa	ble									
	for public inspection. Indicate how you made these available. Check all that apply	,											
	Own website Another's website X Upon request Other (explain in Schedule O)												
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial										
	statements available to the public during the tax year												
20	State the name, address, and telephone number of the person who possesses the organization's books and records												
-	THE ORGANIZATION - 651-587-6174												
	P.O. BOX 4181, SAINT PAUL, MN 55104												
		Г	000	(0010)									

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

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

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

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

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

(A) Name and Title	(B) Average		not c	(C Pos	C) ition			(D) Reportable	(E) Reportable	(F) Estimated
, Hame and Thie	hours per week	box	not c unle cer an	ss pe	rson	is bot	h an	compensation	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee Highest compensated employee		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOAN GORMAN-MEYER	2.00	x	l	x		ļ		٥.	_	_
PRESIDENT (2) ELIZABETH GORMAN	2.00	^	H	^	\vdash	┝	_	0.	0.	0
VICE PRESIDENT	2.00	$ \mathbf{x} $		x	İ			٥.	0.	0
(3) ERIC SCHIEBE	2.00	1	┢─		├─	╁─	┢─		· ·	
RECORDING SECRETARY	2.00	\mathbf{x}		x				0.	0.	0
(4) MATTHEW STARK	2.00	Ħ								
TREASURER		x		х	İ			0.	0.	0
(5) PATRICIA FRANKENFIELD	2.00		Г			T				
MEMBERSHIP SECRETARY		X		Х	ŀ			0.	0.	0
(6) KIRSTEN BUSCHER	1.00									
DIRECTOR		X			<u> </u>			0.	0.	0
(7) DAVID DAHL	1.00]							_	_
DIRECTOR		Х	<u>.</u>			$oxed{igspace}$	<u> </u>	0.	0.	0
(8) KATHLEEN YANARI	1.00	١				ŀ				
DIRECTOR	1 00	Х	<u> </u>	_	<u> </u>	┝	_	0.	0.	0
(9) ROBERT MITCHELL	1.00	x						0.	0.	0
DIRECTOR (10) ADAM KUJAWA	1.00	^		<u> </u>		├	\vdash	<u> </u>	0.	0
DIRECTOR	1.00	x						0.	0.	0
(11) DANIEL HUGHES	1.00					 			-	
DIRECTOR		x						0.	0.	0
(12) THOMAS THOMAS	3.00		\Box	\vdash		\vdash				
DIRECTOR/BUSINESS MANAGER		X			l			0.	0.	0
(13) STEVEN GORMAN	4.50					Π				
FAIR STAND MANAGER		Х						6,320.	0.	0
(14) RICHARD PHILLIPPI	3.50									
FAIR STAND MANAGER		Х						4,800.	0.	0
(15) BERNARD HESSE	2.00	ا								_
FAIR STAND MANAGER	_	X		\vdash				2,730.	0.	0
				L						
		-								
					Ц	<u>. </u>			<u> </u>	Form 990 (201

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Part VII Section A. Officers, Directors, Trus	T	pioy	ees			gne	st C					(F)
(A) Name and title	(B) Average			Pos	C) Ition	1		(D)	(E)		Ect	(F)
Name and title	hours per		not c	heck	more	than is bot		Reportable compensation	Reportable compensation			imated ount of
	week					or/trus		from	from related			other
	(list any	ector				i		the	organization			ensation
	hours for related	9 10	<u>g</u>			zite		organization	(W-2/1099-MI	SC)		m the
	organizations	ruste	ll trust		<u></u>	ingen:		(W-2/1099-MISC)			_	ınızatıon related
	below	Individual trustee or director	Institutional trustee	₅₀	Key employee	est co	<u>ت</u> ة					nizations
	line)	ğ	Insti	Officer	Keye	Highest compensated employee	Former		_			
		1										
		<u> </u>	<u> </u>	_	<u> </u>	_	_					
		ł	l						•			
					\vdash							
		1										
		t	\vdash		\vdash	\vdash		-				
		1										
												
		<u> </u>	_		L							
		-	<u> </u>		_	<u> </u>						
		ł										
		 	┢	\vdash	_	┢					1	
		1										
1b Sub-total							▶	13,850.		0.		0.
c Total from continuation sheets to Part V	II, Section A							0.	,	0.		0.
d Total (add lines 1b and 1c)							<u> </u>	13,850.		0.		0.
2 Total number of individuals (including but r	iot limited to tr	iose	liste	ed at	oove	e) Wi	no r	eceived more than \$100	,000 of reportab	ie		0
compensation from the organization									<u> </u>			Yes No
3 Did the organization list any former officer,	director, or tru	uste	e. ke	v en	olan	vee	or	highest compensated e	mplovee on	1		111
line 1a? If "Yes," complete Schedule J for s				,	•	,		J ,	,,		3	X
4 For any individual listed on line 1a, is the su	um of reportab	le co	omp	ensa	ation	and	d oti	her compensation from	the organization			
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4	Х
5 Did any person listed on line 1a receive or a	<u>.</u>		_		-		elat	ed organization or indivi	dual for services	•		
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch	pers	son					5	X
Section B. Independent Contractors 1 Complete this table for your five highest co	mpanastad in	done	ando	nt o	ootr	roote	vo t	that recovered more than	\$100,000 of oor	anone	ation fr	om
 Complete this table for your five highest co the organization. Report compensation for 	-									iperis	allon ii	OIII
(A)		-				<u> </u>	Ī	(B)	1		(C)
Name and business	address	N	INC	3				Description of s	ervices	С	ompen	
										-		
						_						
							\dashv					
							\dashv		···			
							\dashv	•				
									`			
2 Total number of independent contractors (i	ncluding but n	ot li	mıte	d to	_	-	sted	d above) who received m	ore than			
\$100,000 of compensation from the organi	zation 🕨				(<u>)</u>						-00
											Earm Q	90 (2018)

THE MIDWAY MEN'S CLUB 41-1842630 Form 990 (2018) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated Revenue excluded from tax under (B) Related or Total revenue exempt function business revenue revenue Contributions, G fts, Grants and Other Sirrilar Amounts 1 a Federated campaigns 389. 1b **b** Membership dues 3777 38948848 4 35 4 lc c Fundraising events d Related organizations **1**d 1e e Government grants (contributions) t All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 389 Total. Add lines 1a-1f Business Code 2 a STATE FAIR REVENUE 434,117. 434,117. 722210 Program Service Revenue All other program service revenue 434,117. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal சு வடிரிய 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory **b** Less: cost or other basis and sales expenses Goin or (loss). d Net gain or (loss) 8 a Cross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code

11 a

900099

Total. Add lines 11a-11d

Total revenue See instructions

d All other revenue

435,283.

777.

777.

777.

434,894.

41-1842630 Page 10 Form 990 (2018) Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. **expenses** general expenses expenses Grants and other assistance to domestic organizations 113,792 113,792 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 13,850. 13,850 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees) Management **b** Legal 2,567. 2,567. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 2,000. 2,000. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 13 Office expenses Information technology 14 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 7,692. 7,692. Conferences, conventions, and meetings 19 20 21 Payments to affiliates 1,000. 1,000. Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 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 O.) 212,030. 212,030. STATE FAIR EXPENSES 39,221. 39,221 SOCIAL EVENT С d 526 526 All other expenses 392,678. 3,093 <u>o.</u> 389,585. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here

If following SOP 98-2 (ASC 958-720)

Form 990 (2018)
Part X | Balance Sheet

art X	Balance Sheet					
	Check if Schedule O contains a response or not	e to a	ny line in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			295,123.	1	338,728
2	Savings and temporary cash investments		Ĺ		2	
3	Pledges and grants receivable, net		3			
4	Accounts receivable, nėt				4	
5	Loans and other receivables from current and for					
	trustees, key employees, and highest compensa-	ated e	nployees Complete			T-101-10-10-10-10-10-10-10-10-10-10-10-10
	Part II of Schedule L				5	
6	Loans and other receivables from other disquali					
	section 4958(f)(1)), persons described in section	4958	c)(3)(B), and contributing			
	employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
ŀ	employees' beneficiary organizations (see instr)	Comp	lete Part II of Sch L		6	
7	Notes and loans receivable, net		L		7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges				9	
10a	Land, buildings, and equipment cost or other					
-	basis Complete Part VI of Schedule D	10a	30,000.			
t	Less accumulated depreciation	10b	30,000.	1,000.	10c	
11	Investments - publicly traded securities				11	
12	Investments - other securities See Part IV, line	11			12	
13	Investments - program-related See Part IV, line	11			13	
14	Intangible assets				14	
15	Other assets See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equ	296,123.	16	338,72		
17	Accounts payable and accrued expenses		ļ.	0.	17	
18	Grants payable		1		18	
19	Deferred revenue				19	,
20	Tax-exempt bond liabilities	L		20		
21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
22	Loans and other payables to current and former	office	rs, directors, trustees,			
	key employees, highest compensated employee	es, and	disqualified persons			
	Complete Part II of Schedule L		<u> </u>		22	
23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
24	Unsecured notes and loans payable to unrelate		· –		24	
25	Other liabilities (including federal income tax, pa	•				
	parties, and other liabilities not included on lines	17-24) Complete Part X of			
	Schedule D		<u> </u>		25	
26	Total liabilities. Add lines 17 through 25		. 1371	0.	26	
	Organizations that follow SFAS 117 (ASC 958		k here 🕨 🐰 and			
	complete lines 27 through 29, and lines 33 an	d 34.	.	206 122		220 720
27	Unrestricted net assets		-	296,123.	27	338,72
28	Temporarily restricted net assets		-		28	
29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117 (A	SC 95	B), check here ▶∟			
1	and complete lines 30 through 34.		ļ.			
30	Capital stock or trust principal, or current funds		., . <u> </u>		30	
31	Paid-in or capital surplus, or land, building, or ec		_		31	
32	Retained earnings, endowment, accumulated in	come,	or other funds	206 123	32	220 72
33	Total net assets or fund balances		Ļ	296,123.	33	338,728
34	Total liabilities and net assets/fund balances			296,123.	34	338,728 Form 990 (20

41-18421

SCHEDULE D

(Form 990)

Department of the Treasury

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.

▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization THE MIDWAY MEN'S CLUB 41-1842630 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 」Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

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Sche		WAY MEN'S							42630				
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Othe	Simil	ar Asse	ts(continue	ed)			
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	at are a sig	ınıfıcant	use of its	collection i	tems			
	(check all that apply)												
а	Public exhibition	C		Loan or exc	hange progr	ams							
b	Scholarly research	•	• 🗀	Other			_						
С	3												
4	, , , , , , , , , , , , , , , , , , , ,												
5													
Do	to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or												
Pai	reported an amount on Form 990, Pa	•	ete if the	organizatio	n answered	"Yes" on F	orm 990), Paπ IV,	line 9, or				
12	Is the organization an agent, trustee, custod		diany for	contribution	s or other a	eets not i	acluded						
Ia	on Form 990, Part X?	ian or other intermet	ulary lor	CONTINUENCE	is or other a	33613 1101 11	icidaea		Yes	□ No			
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowina:	table					J 103				
	Tres, explain the arrangement in rate xiii	and complete the re	ono wing	tabio					Amount				
С	Beginning balance						1c		741100111				
	Additions during the year						1d						
	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	ount liabilit	y?		Yes	□ No			
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatio	on has been	provided or	Part XIII							
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	rm 990, Par	t IV, line 10)						
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (c	1) Three y	ears back	(e) Four ye	ars back			
1a	Beginning of year balance												
b	Contributions												
С	Net investment earnings, gains, and losses		ļ										
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs		-										
	Administrative expenses		<u> </u>										
_ ~	End of year balance		L										
2	Provide the estimated percentage of the cur	rent year end baland	•	g, column (a	i)) held as								
	Board designated or quasi-endowment	%	_%										
	Permanent endowment Temporarily restricted endowment	% %											
C	The percentages on lines 2a, 2b, and 2c sho												
3a	Are there endowment funds not in the posse	•	ation the	at are held a	nd administr	ered for the	e organia	ration					
- Oa	by	ssion of the organiz	anon in	at are ricid a	no administ	orea for the	o organiz	ation	Tv.	es No			
	(i) unrelated organizations								3a(i)				
	(ii) related organizations								3a(ii)	<u> </u>			
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	Schedule R?					3b	\top			
4	Describe in Part XIII the intended uses of the	organization's endo	owment	funds									
Par	t VI Land, Buildings, and Equipm	nent.											
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a S	ee Form 990), Part X, lı	ne 10						
	Description of property	(a) Cost or o basis (investi		(b) Cost basis (cumulate eciation	ed	(d) Book v	alue			
1a	Land												
b	Buildings												
С	Leasehold improvements												
d	Equipment			3	0,000.		30,0	00.		0.			
-	Other												
<u>Total</u>	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	0c)					0.			

Schedule D (Form 990) 2018

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

Schedule D (Form 990) 2018

(9)

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

SCHEDULE ! (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 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Attach to Form 990.

2018

OMB No 1545-0047

▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

» X 41-1842630 (h) Purpose of grant or assistance YOUTH ACTIVITIES COUTH ACTIVITIES ______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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 。 Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed .000 (d) Amount of 22,000, cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ė (c) IRC section (if applicable) 3 Enter total number of other organizations listed in the line i table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) CLUB Š 41-1572838 THE MIDWAY MEN'S General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government SAINT PAUL, MN 55104 15 KELLOGG BLVD WEST SAINT PAUL, MN 55102 FRANCISCAN BROTHERS CITY OF SAINT PAUL 1289 LAFOND AVE Part Part II

Schedule I (Form 990) (2018)

Page 2 Schedule I (Form 990) (2018) (f) Description of noncash assistance 41-1842630 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients THE GRANT FUNDS. THE MIDWAY MEN'S CLUB IS NO MONITORING OF (a) Type of grant or assistance PART I, LINE 2: Schedule I (Form 990) (2018) 832102 11-02-18 THERE Part III

SCHEDULE O

(Form 990 or 990-EZ)

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018

Open to Public Inspection

Employer identification number Name of the organization THE MIDWAY MEN'S CLUB 41-1842630 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PRESCRIBED NEIGHBORHOOD IS LOCATED "MIDWAY" BETWEEN DOWNTOWN ST. PAUL AND DOWNTOWN MINNEAPOLIS AND IS A LARGE URBAN AREA. FORM 990, PART VI, SECTION A, LINE 2: ELIZABETH GORMAN, JOAN GORMAN, STEVE GORMAN AND KIRSTEN BUSCHER ARE RELATED. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION HAS MEMBERS THAT HAVE THE POWER TO ELECT THE BOARD MEMBERS. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS NOT REVIEWED BY THE GOVERNING BOARD BEFORE IT IS FILED. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENS AVAILABLE TO THE PUBLIC UPON REQUEST.

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

Schedule O (Form 990 or 990-EZ) (2018)