efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Department of the ▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u> Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public

DLN: 93493314027796 OMB No 1545-0047

Inspection

АГ	or the .	2015 Ca		ning 07-01-2015 , and ending 06-30-	2016	—			
_	eck if ap ddress ch		C Name of organization HEADWATERS FOUNDATION FOR	JUSTICE			-	ntification number	
	ame cha	-	David horizontal			36-3	35938	6	
	nitial retu	ırn	Doing business as						
return	ınal /termına	ted		f mail is not delivered to street address) Room	n/suite	E Teleph	one num	ber	
<u>:</u>	nended r		2801 21ST AVENUE SOUTH NO 13			(612) 879-0	0602	
Ap	plication	pending	City or town, state or province, of MINNEAPOLIS, MN 55407	ountry, and ZIP or foreign postal code		G Gross	receints	\$ 1,926,698	
			F Name and address of prince	cipal officer	H(2)				
			DAVID NICHOLSON		П(а)	Is this a grou subordinates?		rfor	
			2801 21ST AVENUE SOUT MINNEAPOLIS, MN 55407			No		1	
I Ta	ıx-exemp	pt status	•		Н(р)	Are all subord included?	linates	□Yes □ No	
	ebsite:	: ▶ wv	VW HEADWATERSFOUNDATI		一、	•		(see instructions)	
						Group exemp		mber ▶ State of legal domicile	
K For	m of orga	anization	Corporation Trust Asso	ociation Other ►		ar or ronnadon 1	M		
Pa	rt I		nmary						
				on or most significant activities ION IS TO AMPLIFY THE POWER OF	COMMUN	IITY TO ADVA	NCEE	QUITY AND	
œ	<u> 10</u>	STICE							
Š	_								
Ĕ									
Governance	2 C	heck th	nis box 🕨 🥅 if the organization	discontinued its operations or dispos	ed of more	than 25% of it	s net a	ssets	
	3 N	umher	of voting members of the gove	rning body (Part VI, line 1a)			3	16	
Activities &			-	s of the governing body (Part VI, line :			4	16	
¥			· -	n calendar year 2015 (Part V , line 2a	•		5	15	
Act			• •	necessary)	•		6	110	
	7a T	otal uni	related business revenue from	Part VIII, column (C), line 12			7a	0	
	ь Ne	t unrel	ated business taxable income	from Form 990-T, line 34			7b	C	
						Prior Year		Current Year	
	8	Contr	ibutions and grants (Part VIII	, line 1 h)		2,238	,069	1,203,881	
Ē	9	Progra	am service revenue (Part VIII		15	,712	C		
Ravenue	10	Inves	tment income (Part VIII, colu	mn (A), lines 3, 4, and 7d)		88	,559	178,581	
α	11	Other	revenue (Part VIII, column (A	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		16	,355	74,188	
	12	Total 12)	revenue—add lines 8 through :	11 (must equal Part VIII, column (A),	line	2,358	,695	1,456,650	
	13		s and similar amounts paid (Pa	art IX, column (A), lines 1-3)		941	,918	1,090,042	
	14	Benef	its paid to or for members (Par	t IX, column (A), line 4)			0	С	
မွာ	15	Saları 5–10		oyee benefits (Part IX, column (A), line	es	538	,197	468,068	
Expenses	16a		<i>)</i> ssional fundraising fees (Part I	IX, column (A), line 11e)			0	C	
ă X	b	Total fu	undraising expenses (Part IX, column	(D), line 25) ▶ <u>204,248</u>	_				
ш	17	Other	expenses (Part IX, column (A		385,771				
	18	Total	expenses Add lines 13-17 (r	ō)	1,865	,886	1,875,378		
	19	Rever	nue less expenses Subtract lir		492	,809	-418,728		
Net Assets or Fund Balances					Begin	ning of Current	Year	End of Year	
set	20	Total	assets (Part X, line 16)			5,845	,073	5,256,724	
A As	21		liabilities (Part X, line 26) .				,518	82,472	
ξŠ	22	Net a:	ssets or fund balances Subtra	ct line 21 from line 20		5,767	,555	5,174,252	
Pa	rt II	Sign	nature Block						
my k	nowled	ge and		examined this return, including accom omplete Declaration of preparer (othe					
	ı								
c:-		**** Sign	*** ature of officer			2016-11-01 Date			
Sigr Her		, -	ID NICHOLSON EXECUTIVE DIRECTOR						
	-		e or print name and title	· ·					
			Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN	4710	
Pai	d	<u> </u>	DEIRDRE HODGSON	DEIRDRE HODGSON		self-employed			
Pre	pare	r ⊢	Firm's name CLIFTONLARSONALL			Firm's EIN ▶ 4			
	Only	- 11	Fırm's address ► 220 SOUTH SIXTH S	IKEEI SUITE 300		Phone no (61	2) 376-4	500	

MINNEAPOLIS, MN 55402

If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
1 Briefly describe the organization's mission SEE SCHEDULE O 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	<u> </u>
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported. Code (Code) (Expenses \$ 1,430,830 including grants of \$ 1,090,042) (Revenue \$ GRANTMAKING AND DONOR ADVISED FUNDSSEE SCHEDULE O	
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
the prior Form 990 or 990-EZ?	
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If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ 1,430,830 including grants of \$ 1,090,042) (Revenue \$ GRANTMAKING AND DONOR ADVISED FUNDSSEE SCHEDULE O	
If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measi expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported (Code) (Expenses \$ 1,430,830 including grants of \$ 1,090,042) (Revenue \$ GRANTMAKING AND DONOR ADVISED FUNDSSEE SCHEDULE O	_
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expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 1,430,830 including grants of \$ 1,090,042) (Revenue \$ GRANTMAKING AND DONOR ADVISED FUNDSSEE SCHEDULE O	
GRANTMAKING AND DONOR ADVISED FUNDSSEE SCHEDULE O	
	852,235)
Ab /Codo)/Evropros \$ including grants of \$)/Poyonio \$	
Ab /Codo \/Evporces t including graphs of s \/() (Poyonio s	
(Code) (Expenses \$ including grants or \$) (Nevenue \$)
·	
4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
4d Other program services (Describe in Schedule O)	
(Expenses \$ including grants of \$) (Revenue \$	
4e Total program service expenses ► 1,430,830)
1,430,030)

VIII, IX, or X as applicable

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

17

				. age
Par	t 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	. 3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year of "Yes," complete Schedule C, Part II	ır? 4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have tright to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	ne 6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowmen permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Pait V 💆	ts, 10	Yes	

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

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

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

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

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV ">

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

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Νo

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Form 990 (2015)

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20a

Form	n 990 (2015)			Page
Pai	rt IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

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?

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?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

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

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

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

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

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

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

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

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

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

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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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31

24c

24d

25a

25b

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28a

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28c

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Yes

Form 990 (2015)

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orm	990 (2015)			Page !
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		一
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible as charitable contributions?	- Oa		NO
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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	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		No
9 a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
0	Section 501(c)(7) organizations. Enter	\dashv		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	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 amounts due or received from them)			
	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		

b Enter the amount of reserves the organization is required to maintain by the states

in which the organization is licensed to issue qualified health plans \dots \boldsymbol{c} . Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

 ${f b}$ If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule ${f O}$.

Form **990** (2015)

14a

14b

13b

13c

year by the following

Section C. Disclosure

Part

990 (2	2015)	Page 6
VI	Governance, Management, and Disclosure	
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below	W,

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						[7
ction A. Governing Body and Management							
					Yes	No	
Enter the number of voting members of the governing body at the end of the tax year	1a		:	16			_
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							

2

3

4

5

7a

10b

11a

12a

12h

12c

13

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Yes

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Νo

Form 990 (2015)

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Nο

Νo

				 103	L
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are				ı

1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16

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

Did the organization delegate control over management duties customarily performed by or under the direct

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

Did the organization become aware during the year of a significant diversion of the organization's assets?

supervision of officers, directors or trustees, or key employees to a management company or other person? .. Did the organization make any significant changes to its governing documents since the prior Form 990 was

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

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

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

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

 ${f b}$ Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

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

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?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ▼ Own website ▼ Another's website ▼ Upon request □ Other (explain in Schedule O)

State the name, address, and telephone number of the person who possesses the organization's books and records ▶DAVID NICHOLSON 2801 21ST AVENUE SOUTH NO 132-B MINNEAPOLIS, MN 55407 (612) 400-6265

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

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?

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

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

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

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

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

(14) DAMEUN STRANGE BOARD MEMBER

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual tru compensated employees, and former such person Check this box if neither the organization noi	ons									e
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	Pos m unles	(F) Estimated amount of other compensation from the							
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) OWEN DUCKWORTH CO-CHAIR	1 00	x		×				0	0	0
(2) JESSICA SCHAEPPI CO-CHAIR	1 00	x		х				0	0	0
(3) ELIANNE FARHAT SECRETARY	1 00	х		х				0	0	0
(4) BRENDA GROFF TREASURER/BOARD MEMBER	1 00	х		×				0	0	0
(5) JEFF WEISS TREASURER/BOARD MEMBER	1 00	х		×				0	0	0
(6) EARTHA BELL BOARD MEMBER	1 00	х						0	0	0
(7) MALIK HOLT-SHABAZZ BOARD MEMBER	1 00	х						0	0	0
(8) MUNEER KARCHER-RAMOS BOARD MEMBER	1 00	х						0	0	0
(9) ANN MANNING BOARD MEMBER	1 00	x						0	0	0
(10) ERICA MAUTER BOARD MEMBER	1 00	х						0	0	0
(11) JAMES RUSTAD BOARD MEMBER	1 00	х						0	0	0
(12) ELIZABETH SCOTT BOARD MEMBER	1 00	х						0	0	0
(13) LEIGH STEPAN BOARD MEMBER	1 00	х						0	0	0
(14) DAMEUN STRANGE	1 00									

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

									Ι	<u> </u>			
	(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	from rela organiza (W- 2/10	able ation ated tions 099-	Estin amou oth compei from	nated int of ner nsation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC	.)	organi and re organiz	lated
(15)	MALA THAO	1 00	×							0	0		ſ
	D MEMBER		^							<u> </u>			
. ,	DANIA TOSCANO MIWA	1 00	x							0	0		(
	D MEMBER		_ ^								٥		,
	KABO YANG	1 00											,
	D MEMBER		X							0	0		·
. ,	DAVID NICHOLSON	41 00											
	JTIVE DIRECTOR	• • • • • • • • • • • • • • • • • • • •			×				92,6	25	0		19,287
(19)	MARIA DE LA CRUZ	43 00											
	CIATE EXECUTIVE DIRECTOR	•••••			X				70,1	58	0		15,903
	DE VIZ ENESSIVE SENESION												
1b	Sub-Total			•	>		•			•	T	•	
c	Total from continuation sheets to Part VII	, Section A .			•								
d	Total (add lines 1b and 1c)				•			1	62,783	0			35,190
2	Total number of individuals (including but n \$100,000 of reportable compensation from			ed a	bov	e) w	ho rec	eiv	ed more than				
												Yes	No
3	Did the organization list any former officer, on line 1a? <i>If "Yes," complete Schedule J for</i>			y em	plo •	yee,	or hi	ghe: •	st compensate	d employee	3		No
4	For any individual listed on line 1a, is the s organization and related organizations grea individual									om the			No
_		· ·				•	- 1				4		No
5	Did any person listed on line 1a receive or services rendered to the organization? If "Y								ganization or ir	idividual for	_		
	services rendered to the organization of the	cs, complete str	cuuie	וטוכ	s u C	n pe	13011	•			5		No_
	ection B. Independent Contractors												
1	Complete this table for your five highest co	mnensated inde	nende	nt co	ntr	acto	re tha	t re	ceived more th	an \$100 00			
_	- Complete this table for your live highest co	mpensateu mue	penae	111 66	TICLO	4 C L U	ı o tıra		ccived more ti	ап фтоо,оо	0 01		

compensation from the organization Report Compensation for the calendar year ending	compensation from the organization report compensation for the calendar year ending with or within the organizations tax year									
(A) Name and business address	(B) Description of services	(C) Compensation								

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

Form 99	•	•						Page S
Part \	/1111	Statement of						
		Check If Sched	ule O contains a respo	nse or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ક ક	1a	Federated cam	paigns 1a					
ant	Ь	Membership du	ıes 1 b					
G.	c	Fundraising ev	ents 1 0	5,650				
ifts. ar A	d	Related organiz	zations 1d					
E G	e	Government grant	es (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	l f							
		similar amounts no	ot included above					
a tri	g	1a-1f \$		23,449				
<u>공</u>	h	Total. Add lines	s 1a-1f		1,203,881			
	2a			Business Code				
۴۷÷۲	b							
aŕ C⊊	_ c							
<u>۲</u>	d							
S.	e	-						
Program Service Revenue	f	All other progra	am service revenue					
ĕ	g	Total. Add line	s 2a-2f	>				
	3		come (including divider ar amounts)		50,604			50,604
	4		stment of tax-exempt bond		·			1
	5	Royalties .	. <u></u> .	•				
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	528,660					
	Ь	Less cost or other basis and	400,683					
	c	sales expenses Gain or (loss)	127,977					
	d	Net gain or (los	ss)		127,977			127,977
Other Revenue	8a	events (not inc						
her Re		See Part IV, lir	ne 18 a	130,510				
ŏ	C		penses b (loss) from fundraising		67,151			67,15
	9a	Gross income f	from gaming activities ne 19					
	b c		penses b (loss) from gaming act					
	10a	Gross sales of returns and allo						
	b	Less cost of g	oods sold b					
	С		(loss) from sales of inv					
	112	Miscellaneou		Business Code 900099	7,037			7,037
	11a b	MISCELLANEC	OUS REVENUE	300033	,,,,,,,			,,,,,,
	c							+
	d	All other reven	ue					
	e	Total. Add line:	s 11a-11d	•	7,037			
	12	Total revenue.	See Instructions .		1,456,650	0		0 252,769
					,,		•	Form 990 (2015

Part IX Statement of Functional Expenses

Section	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 th	nis Part IX				
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,074,498	1,074,498			
2	Grants and other assistance to domestic individuals See Part IV, line 22	5,544	5,544			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15					
4	and 16	10,000	10,000			
5	Compensation of current officers, directors, trustees, and	184,563	45,927	60,519	78,117	
6	key employees	184,303	43,327	00,319	78,117	
7	Other salaries and wages	218,273	146,445	27,520	44,308	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,418	7,527	1,479	2,412	
9	Other employee benefits	25,366	16,679	2,936	5,751	
10	Payroll taxes	28,448	13,117	5,911	9,420	
11	Fees for services (non-employees)	20,440	13,117	3,911	9,420	
а	Management					
b	Legal					
С	Accounting	108,896	14,000	94,896		
d	Lobbying					
е	Professional fundraising services See Part IV, line 17					
f	Investment management fees					
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,000	5,000			
12	Advertising and promotion					
13	Office expenses	25,927	17,176	544	8,207	
14	Information technology	27,480	21,596	4,078	1,806	
15	Royalties					
16	Occupancy	10,811	9,912		899	
17	Travel					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	41,460	32,937	2,560	5,963	
20	Interest	4,500		4,500		
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	10,135		10,135		
23	Insurance	4,950	3,820	830	300	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)					
а	BAD DEBT	44,972	4,972		40,000	
b	MISCELLANEOUS EXPENSES	29,543	1,680	20,798	7,065	
С	MEMBERSHIPS	3,594		3,594		
d						
е	All other expenses					
25	Total functional expenses. Add lines 1 through 24e	1,875,378	1,430,830	240,300	204,248	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)					
ı				F	orm 990 (2015)	

Form 990 (2015) Part X 1 2 Savings and temporary cash investments 3 Pledges and grants receivable, net . 4 Accounts receivable, net . . 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

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b

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34

Net Assets or Fund Balances

Balance Sheet

II of Schedule L

Grants payable

Deferred revenue .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

Notes and loans receivable, net . .

Prepaid expenses and deferred charges .

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

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

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

Secured mortgages and notes payable to unrelated third parties . . .

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

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

Retained earnings, endowment, accumulated income, or other funds

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

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

lines 27 through 29, and lines 33 and 34.

Unrestricted net assets . . .

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

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

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

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

Investments—publicly traded securities . .

Inventories for sale or use

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Check if Schedule O contains a response or note to any line in this Part X . . . Cash-non-interest-bearing

10a

10b

Beginning of year 1,118,107 48,480

(A)

2 3 4

1

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100

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12

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22 23

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31

32

33

14,183

(B)

End of year

8,000

851,918 19,001

28,029

26,874

52,897

410,834

896.767

71,740

C

10.732

82,472

587,408

174.864

4,411,980

5.174.252

5.256.724

Form 990 (2015)

5,256,724

2,956,221

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

161.497

134,623

5

16,304

31,812

33,397

510,834

960,143

33,729

38,124

5 665

77,518

1,182,543

4,411,980

5.767.555

5.845.073

173.032

5,845,073

3,117,996

se or note to any line in this Part XI

Net unrealized gains (losses) on investments .

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

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

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

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

Consolidated basis

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

Consolidated basis

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

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

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

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

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

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

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

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

Both consolidated and separate basis

Both consolidated and separate basis

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

Donated services and use of facilities .

Investment expenses

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

art XI	Reconcilliation of Net Assets
	Check if Schedule O contains a respons

Tabel manager (manager) Boot VIII and manager (A) have 42)
Total revenue (must equal Part VIII, column (A), line 12)

Page **12**

1,456,650

1,875,378

-418,728

5,767,555

-154,919

-19,656

No

Νo

Νo

Form 990 (2015)

5,174,252

Yes

Yes

Yes

2a

2b

2c

3a

3b

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efi	le GF	RAPHIC pr	int - DO I	NOT PROCES	SS As Filed Da	ta -		DLN: 93	3493314027796
990EZ) Department of the Treasury			•	Complete if the	c Charity Statu e organization is a sec 4947(a)(1) nonex • Attach to Forn bout Schedule A (Forn 1970).	tion 501(c)(3) empt charitabl 1990 or Form 9	organization of e trust. 990-EZ.	O rt or a section	2015 Open to Public Inspection
Interr	al Reve	enue Service	_					1	
		he organizat S FOUNDATION						Employer identification	ation number
				-				36-3359386	
Pa	rt I	Reason	for Publi	c Charity S	tatus (All organiza	ations must c	omplete this	part.) See instruction	ons.
The	organı	ızatıon ıs not	a private fo	oundation beca	ause it is (For lines 1	through 11, c	heck only one l	box)	
1		A church,	convention	of churches, o	r association of churc	hes described	in section 170	(b)(1)(A)(i).	
2		A school d	escribed in	section 170(b)(1)(A)(ii). (Attach S	chedule E (For	m 990 or 990-	EZ))	
3		A hospital	or a cooper	atıve hospıtal	service organization	described in s e	ection 170(b)(1	L)(A)(iii).	
4					rated in conjunction	with a hospital	described in s e	ection 170(b)(1)(A)(iii	i). Enter the
E	_	hospital's	name, city,	and state	nofit of a collogo or ur	niversity owner	d or operated by	y a governmental unit o	described in costion
5				omplete Part I		iiversity owner	or operated by	y a governmental unit t	rescribed in Section
6					or governmental unit	t described in s	section 170 (b)((1)(A)(v).	
7	•	An organization that normally receives a substantial part of its support from a governmental unit or from the general public						general public	
	_				vi). (Complete Part II		· · + IT \		
8 9	<u> </u>		•		ion 170(b)(1)(A)(vi)	•	•	ributions momborshin	foos and gross
10	, 	An organization that normally receives (1) more than 331/3% 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 331/3% of its supp from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).						331/3% of its support es acquired by the	
11 a	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Chec the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g						on 509(a)(3). Check L1f, and 11g Ily by giving the		
	-		_				rity of the direc	tors or trustees of the	supporting
b	Г	Type II. A manageme	supporting nt of the su	organization s ipporting orgar	nization vested in the	ed in connectio		orted organization(s), l manage the supported	
c		Type III f	inctionally					h, and functionally inte), and E.	grated with, its
d	Γ	not functio	nally integr	ated The orga	nızatıon generally mu	ıst satısfy a dı	stribution requi	with its supported org rement and an attentiv	
e					te Part IV, Sections A ceived a written detei			ıs a Type I, Type II, T	ype III functionally
	l			-	ally integrated suppo			, , , , , , , , , , , , , , , , , ,	,,,
f	Ente				ns			· · · · · · ·	
g		Provide the	e following i	nformation abo	out the supported orga	anızatıon(s)			
		(:)		(III) ETNI	/:::>	7:5		(v)	()
(i) Name of supported o			ganızatıon	(ii)EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	Is the org	(iv) Is the organization listed in your governing modecument? (see		(vi) A mount of other support (see Instructions)
						Yes	No		
								+	
Tota	.1							+	
iota				I		1	1	1	I
For F	Paperv	work Reducti	on Act Not	ice, see the In	structions for Form 9	90 or 990EZ.	Cat No 11		ı 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you Part III. If the organize							alify under
S	ection A. Public Support	acion rans to que	anny ander the i	icoto notea bete	w, piedse com	ipiete i i	<u> </u>	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2	015	(f) ⊤otal
•	fiscal year beginning in)	(4)2011	(5)2012	(6)2013	(4)2014	(0)2	-	(1)10ta1
1	Gifts, grants, contributions, and membership fees received (Do	1,238,854	2,607,390	1,703,610	2,238,069		1,079,498	8,867,42
	not include any unusual grants)	1,230,03	2,007,030	1,703,010	2,230,003		2,0,3,130	0,007,12
2	Tax revenues levied for the							
_	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit							
	to the organization without							
4	charge	1,238,854	2,607,390	1,703,610	2,238,069		1,079,498	8,867,42
4	Total. Add lines 1 through 3 The portion of total contributions	1,230,034	2,007,550	1,705,010	2,230,003		1,075,450	0,007,42.
5	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							2,983,59
	on line 1 that exceeds 2% of the							
	amount shown on line 11, column							
	(f)							
6	Public support. Subtract line 5							5,883,82
_	from line 4							
	ection B. Total Support			1				
(0)	Calendar year fiscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2	015	(f) ⊤otal
7	Amounts from line 4	1,238,854	2,607,390	1,703,610	2,238,069		L,079,498	8,867,42
8	Gross income from interest,	2,200,001	2/00//030	27, 00,020	2,200,000	•	2,073,130	0,007,12.
0	dividends, payments received on							
	securities loans, rents, royalties	35,859	66,140	140,216	88,544		50,604	381,363
	and income from similar sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly							
40	carried on Other income Do not include							
10	gain or loss from the sale of							
	capital assets (Explain in Part	490	5,784	16,551	31,157		7,037	61,019
	VI)							
11	Total support. Add lines 7							9,309,803
	through 10							5,305,60.
12	Gross receipts from related activit	ies, etc (see insti	ructions)			12		44,802
13	First five years.If the Form 990 is	for the organization	on's first, second,	thırd, fourth, or fi	fth tax year as a	section !	501(c)(3)	organization,
	check this box and stop here						▶□	
S	ection C. Computation of Pu							
14	Public support percentage for 201	5 (line 6, column (f) divided by line	11, column (f))		14		63 200 %
						<u> </u>	-	

15

Schedule A (Form 990 or 990-EZ) 2015

▶ 🗸

Public support percentage for 2014 Schedule A, Part II, line 14 15

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

62 790 %

▶┌

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

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

17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

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

supported organization

instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part

	II. If the organization	fails to qualify	under the tes	ts listed below,	please comple	ete Part II.)	
Se	ction A. Public Support			•		•	
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
(or f	iscal year beginning in) 🟲	(a)2011	(0)2012	(6)2013	(u)2014	(6)2013	(1) 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						
_	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
5	paid to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
_	the amount on line 13 for the year Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
Se	ction B. Total Support						
	Calendar year						
(or f	iscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
`9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
C	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is f	or the organization	n's first socsad	third fourth as	fifth tay year as a	soction FO1/cV	2 \ organization
14		or the organizatio	m s mst, secona	, cilia, iourcii, or i	muntax year as a	Section 501(C)(.	· -
	check this box and stop here	lie Cuppert D					▶ □
	ction C. Computation of Pub			101 (0)			
15	Public support percentage for 2015			13, column (f))		15	
16	Public support percentage from 201	.4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
17	Investment income percentage for 3	2015 (line 10c, co	olumn (f) dıvıded	by line 13, colum	nn (f))	17	
18	Investment income percentage from	n 2014 Schedule	A . Part III . line 1	17		18	

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

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I.

	It of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you I, complete Sections A and D, and complete Part V)	u cnec	ked 11	a or Pai
Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
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)	2		
	Did the organization have a supported organization described in section $501(c)(4)$, (5) , or (6) ? If "Yes," answer (b) and (c) below	3a		
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	3b		
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	3 c		
4-	Was any supported organization not organized in the United States ("foreign supported organization")?	I		l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a		
U	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	4b		
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	4c		
5 2	organization was used exclusively for section 170(c)(2)(B) purposes Did the organization add, substitute, or remove any supported organizations during the tax year?	I		
Ja	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)	5a		
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by	50		
	one or more of its supported organizations, or (c) 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 .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) 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 .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
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)	10b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		

No

Pailiv	supporting organizations (continued)
Section	B. Type I Supporting Organizations

o regularly tax year? colled the powers to conditions or organization(s)	1							
organization(s)			l					
zation(s) that	2							
Section C. Type II Supporting Organizations								
_		Yes	No					
	directors or	e same persons						

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

3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3	
S	ection E. Type III Functionally-Integrated Supporting Organizations		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below	e instru	ıctions)

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

- The organization supported a governmental entity Describe in Part VI how you supported a government entity (see
- instructions)

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

2	Activities Test	Answer (a) and (b) below.		Yes	
а	Did substantiall	ly all of the organization's activities during the tax year directly further the exempt purpos	es of the		T

<u> </u>	_
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the	Γ
supported organization(s) to which the organization was responsive?	l
If "Ves " then in Part VI identify those supported organizations and explain how these activities directly	ı

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the		
supported organization(s) to which the organization was responsive?		
If "Voc " then in Boat VI identify these supported erganizations and explain how these activities directly	,	

а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the	4	ı
	supported organization(s) to which the organization was responsive?		l
	If "Yes," then in Part VI identify those supported organizations and explain how these activities directly		l
	furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the		l
	organization determined that these activities constituted substantially all of its activities	2a	ı

	supported organization(s) to which the organization was responsive?	
	If "Yes," then in Part VI identify those supported organizations and explain how these activities directly	
	furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	

If "Yes," then in Part VI identify those supp	ported organizations and explain how these activities directly
furthered their exempt purposes, how the organ	ization was responsive to those supported organizations, and how the
organization determined that these activities co	nstituted substantially all of its activities
b Did the activities described in (a) constitute	activities that, but for the organization's involvement, one or more of

furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?	

If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

2b

3a

3b

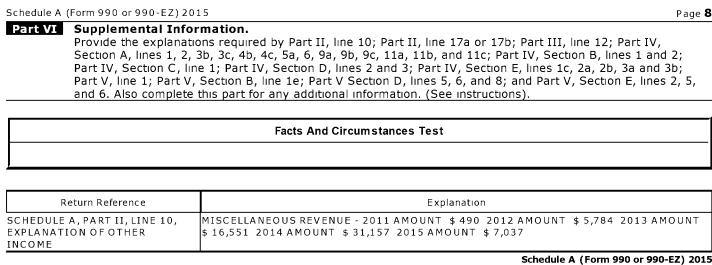
instructions)

Page **6**

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

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

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



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE C** (Form 990 or

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 1545-0041 Open to Public Inspection

Employer identification number

36-3359386

DLN: 93493314027796

Treasury Internal Revenue Service

Department of the

990-EZ)

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

- 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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization

HEADWATERS FOUNDATION FOR JUSTICE

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

- 2 Political expenditures
- Volunteer hours

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

 - Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

 - Was a correction made?

 - If "Yes," describe in Part IV
- Complete if the organization is exempt under section 501(c), except section 501(c)(3).
- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

(a) Name

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

- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

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

(b) Address

- amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

(c) EIN

- organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the

(d) A mount paid from

filing organization's

funds If none, enter -0-

Yes

┌ Yes

☐ Yes

0

- separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political
 - contributions received
 - and promptly and directly delivered to a separate political organization If none, enter -0-

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2015

(b) Affiliated

group totals

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

Check ▶ ✓ If the filing organization checked box A and "limited control" provisions apply

expenses, and share of excess lobbying expenditures)

Total lobbying expenditures to influence public opinion (grass roots

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

(a) Filing

organization's

totals

lobbvina) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b)

Other exempt purpose expenditures

1a

1,740,985 1,740,985

Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:

The lobbying nontaxable amount is:

(b)2013

234.810

58,703

237,049

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

Over \$17,000,000 \$1,000,000

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

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

beginning in)

reporting section 4911 tax for this year?

Lobbying nontaxable amount

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

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

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

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

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

20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000

Yes

(c)2014

232,654

58,164

59,262

☐ No

(d)2015

(e) Total

951,025

1,426,538

2.697

237,757

356,636

40

237,049

59,262

Schedule C (Form 990 or 990-EZ) 2015

4-Year Averaging Period Under section 501(h) columns below. See the separate instructions for lines 2a through 2f.)

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

(a)2012

246,512

2.697

61,628

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year

Return Reference

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)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity No A mount Yes During the year, did the filing organization attempt to influence foreign, national, state or local 1 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? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political 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 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a a Current year **b** Carryover from last year 2h c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 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 4 political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 5 Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

Page 3

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DLN: 93493314027796 OMB No 1545-0047

Inspection

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.

Department of the

(Form 990)

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

Internal Revenue Service **Employer identification number** Name of the organization HEADWATERS FOUNDATION FOR JUSTICE 36-3359386 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 12 Aggregate value of contributions to (during 329,212 Aggregate value of grants from (during year) 824.914 Aggregate value at end of year 425,018 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ✓ Yes 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 an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, 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 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 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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 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 **▶** \$ _ 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

Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2015

Cat No 52283D

ar	Organizations Maintaining (continued)	Collections of A	Art, Histo	rical	Treasures, or	Other Similar A	ssets
3	Using the organization's acquisition, accollection items (check all that apply)	ession, and other re-	cords, ched	kany	of the following that	are a significant us	e of its
а	Public exhibition		d		oan or exchange pro	grams	
b	•		e	_	ther	-	
	Scholarly research						
C	Preservation for future generations						
4	Provide a description of the organization Part XIII	's collections and ex	plain how t	hey fur	ther the organizatio	n's exempt purpose	e in
5	During the year, did the organization sol assets to be sold to raise funds rather th	nan to be maintained					s No
Pai	rt IV Escrow and Custodial Arra Complete if the organization Part X, line 21.		n Form 99	0, Pai	t IV, line 9, or re	ported an amour	nt on Form 990,
1a	Is the organization an agent, trustee, cu included on Form 990, Part X?	stodian or other inte	rmediary fo	rcontr	ibutions or other as	sets not	s √ No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the follo	wing ta	ble	Am	ount
c	Beginning balance				10		
d	Additions during the year				10	i	
e	Distributions during the year				16	2	
f	Ending balance				11	•	
2 a	Did the organization include an amount of	on Form 990, Part X,	line 21, for	escro	w or custodial acco	unt liability? Ye	s 🗸 No
h							
b	If "Yes," explain the arrangement in Par rt V Endowment Funds. Comple						
Ра	rt V Endowment Funds. Comple	(a)Current year	(b)Pnory		b (c) Two years back		(e)Four years back
1a	Beginning of year balance	4,535,522		025,923	3,535,708	3,083,155	3,294,430
b	Contributions	, ,	•	621,505	2,471	38,337	15,650
_				,	·	,	,
c	Net investment earnings, gains, and losses	-175,953		59,817	642,671	562,736	-86,34
d	Grants or scholarships					148,520	140,578
е	Other expenditures for facilities and programs	187,034		21,723	154,927		
f	Administrative expenses			150,000			
g	End of year balance	4,172,535	4,	535,522	4,025,923	3,535,708	3,083,15
2	Provide the estimated percentage of the	current vear end hal	lance (line	1a, col	umn (a)) held as		
- а	Board designated or quasi-endowment ▶			5, 53.	. (//		
b	Permanent endowment ► 94 000 %						
	r emanene endowment p	6 000 %					
C	Temporarily restricted endowment ►	2 3 0 0 70					

The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the

(i) unrelated organizations

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

3b Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

organization by

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		161,497	134,623	26,874
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, c	olumn (B), line 10(c))	>	26,874
			Schedule D (Form 990) 2015

Yes

Yes

3a(i)

3a(ii)

No

Νo

	(Form 990) 2015	Compalate of the con		an annual IVa	al an Farm 00	Page 3
Part VII	See Form 990, Part X, line 12.		ganızatı	on answered 'Ye		
	(a) Description of security or category(including name of security)	ory	(b) Book value		od of valuation of-year market value
	al derivatives					
(3)Other	r-held equity interests					
Total. (Colum	mn (b) must equal Form 990, Part X, col (B) line 12) •				
Part VII	Investments—Program Related	red 'Ves' on Form	000 Da	rt IV line 11c -		
	Complete if the organization answe (a) Description of investment	red fes on rolli) Book value		Part X, line 13. nod of valuation
/42NOTES			\-			of-year market value
(1)NOTES	RECEIVABLE FROM FOUNDATIONS			410,834		С
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 13)	•		410,834		
Part IX		ation answered 'Yes'	on Form	990, Part IV, line		90, Part X, line 15 b) Book value
(1) INTER	EST IN THE NET ASSETS OF THE MINNE	•	NC			896,767
Total (Cole	ump (h) must oqual Form 000, Part V, cal (P) li	no 15)				896,767
Part X	umn (b) must equal Form 990, Part X, col (B) li Other Liabilities. Complete if the o		red 'Ye	s' on Form 990,	· · ▶ Part IV, line 1	
	See Form 990, Part X, line 25. (a) Description of liability	(b) Book va	lue			
1.	(a) Descripcion of Mashie,	(2) 500% (4)	-			
Federal inc	come taxes					
TENANTS	SECURITY DEPOSITS		1,880			
DEFERRE	O RENT PAYABLE		8,852			
DETERME	NEW TATABLE		0,032			
		1				
	mn (b) must equal Form 990, Part X, col (B) line 25)	· · · · · · · · · · · · · · · · · · ·	0,732			
	for uncertain tax positions. In Part XIII, pro on's liability for uncertain tax positions unde					
XIII 🔼	·					

1

2

а

d

е

Part XII

1 2

d

3

b

Part XIII

information

PART V, LINE 4

Schedule D (Form 990) 2015

Page 4

1,351,931

-104,719

1,456,650

1,456,650

1,945,234

69,856

Other (Describe in Part XIII)

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Total expenses and losses per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

WISCONSIN

Add lines 2a through 2d . . . Subtract line 2e from line 1 .

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

Other (Describe in Part XIII)

Donated services and use of facilities

Other (Describe in Part XIII)

Supplemental Information

Prior year adjustments

Add lines 2a through 2d . . .

Subtract line 2e from line 1 .

Add lines 4a and 4b . .

Return Reference

Other (Describe in Part XIII) . . .

Add lines 4a and 4b . .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

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

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)

4b Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

2a

2b

2c

2d

THE FOUNDATION MAINTAINS THE ENDOWMENT TO SUPPORT GENERAL OPFRATIONS AND

FUND GRANTMAKING FOR THE BENEFIT OF INDIGENOUS LEAD GROUPS IN MINNESOTA AND

2b

2c

2d

69,856

-154,917

69,854

-19,656

4c

2e

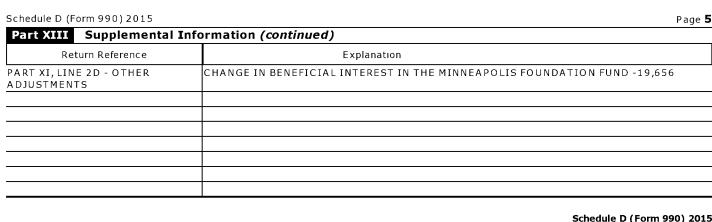
2e

3

3 1,875,378 4c

Schedule D (Form 990) 2015

1,875,378



efile GRAPHIC print	- DO NOT	PROCESS	As Filed Dat	ta -		DLN:	9349331	4027796		
SCHEDULE F (Form 990)	Statement of Activities Outside the United States						OMB No 1545-0047			
(Form 990)		► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.						2015		
Department of the Treasury Internal Revenue Service	on about Schedu	ov/form990.	Open to Public Inspection							
Name of the organization HEADWATERS FOUNDAT	ΓΙΟΝ FOR JU	ISTICE				Employer iden 36-3359386	tification n	umber		
Part I General In	formation	on Activitie	es Outside th	ne United States.		30-3339360				
				orm 990, Part IV, line	14b.					
_		_		s to substantiate the ants or assistance, and		_				
used to award the	grants or a	ssistance?					✓ Ye	s \lceil N		
assistance outside	e the United	States		rocedures for monitori		_	its and oth	er		
(a) Region	T (THE IOHOW	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	i i	(e) If act program	civity listed in (d) is m service, describe pecific type of vice(s) in region	for and i	expenditures nvestments region		
(1)			region	regiony						
(2)										
(3)										
(4)										
(5)										
3a Sub-total		0	0							
b Total from continuat		0	0							
c Totals (add lines 3a For Paperwork Reduction Ac		0	for Form 000		l No 500	1001111	 ule F (Form	000) 2015		

(a) Name of

organization

(1)

(2) (3) (4)

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

(h) Description

of non-cash

assistance

N/A

additional	space is need	led.
ime of	(b) IRS code	

section

and EIN (If

applicable)

(c) Region

NORTH AMERICA

arant GENERAL

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

OPERATING

(d) Purpose of

(e) A mount of

cash grant

cash disbursement 10.000 CHECK

(f) Manner of

(g) A mount

of non-cash

assistance

Page 2

(i) Method of

valuation

(book, FMV,

appraisal, other)

CASH VALUE PAID

appraisal, other)

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash assistance assistance (book, FMV,

Part III can b	יש
(a) Type of grant or assistance	

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

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

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

5713, do not file with Form 990)

Yes

Schedule F (Form 990) 2015

method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III

OF BOARD MEMBERS. BUDGET AND FINANCIAL INFORMATION. AND A WRITTEN NARRATIVE PROPOSAL ABOU TITHE PROJECT IF AN AWARD IS MADE, GROUPS MUST SIGN A GRANT AGREEMENT INDICATING THE TERM S OF THE GRANT AND REPORTING REQUIREMENTS GROUPS MUST ALSO PROVIDE EVIDENCE OF CURRENT RE GISTRATION WITH THE MINNESOTA ATTORNEY GENERAL'S CHARITY DIVISION IF FUNDS ARE DISTRIBUTE D TO A FISCAL AGENT, A LETTER IS REQUIRED FROM THAT ORGANIZATION INDICATING THE ORGANIZATI ON'S WILLINGNESS TO SERVE IN THAT CAPACITY ORGANIZATIONS RECEIVING FUNDING ARE REQUIRED T O SUBMIT A FINAL REPORT ONE YEAR AFTER FUNDS WERE RECEIVED ORGANIZATIONS THAT WERE FUNDED. IN THE PREVIOUS YEAR ARE REQUIRED TO SUBMIT A SIX-MONTH PROGRESS REPORT WITH THEIR CURREN. T APPLICATION ORGANIZATIONS THAT WERE FUNDED PREVIOUSLY MUST HAVE ALL PROGRESS REPORTS SU BMITTED BEFORE ANY ADDITIONAL DOLLARS ARE GRANTED

990 Schedule F, Supplemental Information

Return Reference Explanation

ACCRUAL METHOD OF ACCOUNTING

Return Reference Explanation

PART I. LINE 3

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493314027796

OMB No 1545-0047

2015

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a

Open to Public

	rtment of the Treasury nal Revenue Service	Attach to Form 990 or Form 990-EZ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990								Open to Public Inspection	
					Employer ide	ntification number					
HEADWATERS FOUNDATION FOR JUSTICE 36-33593					36-3359386	i					
Pa		_	•		_		n answered "Yes"	on Form	990, Part IV	, line 17.	
	Form 990-E	Z file	rs are not requir	ed to co	mplete t	his	part.				
1	Indicate whether the organization raised funds through any of the following activities Check all that apply										
а	Mail solicitation	Mail solicitations e Solicitation of non-government grants									
b	☐ Internet and email solicitations f ☐ Solicitation of government grants										
c	Phone solicitations g Special fundraising events										
d	☐ In-person solic	In-person solicitations									
2a	Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising Yes No services?										
b	If "Yes," list the te to be compensated	n high at lea	est paid individuals ist \$5,000 by the o	or entiti rganizati	es (fundra on	nser	rs) pursuant to agree	ements un	der which the f	undrais er is	
((i) Name and address of Individual or entity (fundraiser)		(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(i	v) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)		(vi) A mount paid to (or retained by) organization	
1				Yes	No						
2											
3											
4											
5 											
6											
7											
8											
9											
10											
Tota	ıl				<u> </u>						
	ist all states in whic registration or licensi		organization is regi	stered or	licensed	to s	olicit contributions (or has beer	n notified it is e	exempt from	

If "Yes," explain

Schedule G (Form 990 or 990-EZ) 2015 Page 2 Fundraising Events. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b)Event #2 (c)Other events (d) Total events GALA (add col (a) through (event type) (event type) (total number) col (c)) 142,166 142,166 **1** Gross receipts 5,650 2 Less Contributions. 5,650 3 Gross income (line 1 minus line 2) 136,516 136,516 4 Cash prizes Noncash prizes 7,072 7,072 6 Rent/facility costs 6,672 6,672 Expenses 7 Food and beverages 12,222 12,222 8 Entertainment 650 650 Teg Teg 9 Other direct expenses 42,749 42,749 10 Direct expense summary Add lines 4 through 9 in column (d) 69,365 11 Net income summary Subtract line 10 from line 3, column (d) 67,151 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b)Pull tabs/Instant (d) (c)O ther gaming Revenue (a)Bingo Total gaming (add col bingo/progressive bingo (a) through col (c)) 1 Gross revenue . Expenses 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes______% **☐ Yes** % No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities Yes No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes No

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493314027796 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes." on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number HEADWATERS FOUNDATION FOR JUSTICE 36-3359386 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (f) Method of (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 38 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

Schedule I (Form 990) 2015

	Trional space is needed				
(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GRANT STIPENDS	16	5,544		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Return Reference Explanation PART I, LINE 2 WITH AN INITIAL APPLICATION, GROUPS MUST SUPPLY A COPY OF THE DETERMINATION LETTER, A LIST OF BOARD MEMBERS, BUDGET

AND FINANCIAL INFORMATION, AND A WRITTEN NARRATIVE PROPOSAL ABOUT THE PROJECT IF AN AWARD IS MADE, GROUPS MUST SIGN A GRANT AGREEMENT INDICATING THE TERMS OF THE GRANT AND REPORTING REQUIREMENTS. GROUPS MUST ALSO PROVIDE EVIDENCE OF CURRENT REGISTRATION WITH THE MINNESOTA ATTORNEY GENERAL'S CHARITY DIVISION IF FUNDS ARE DISTRIBUTED TO A FISCAL AGENT, A LETTER IS REQUIRED FROM THAT ORGANIZATION INDICATING THE ORGANIZATION'S WILLINGNESS TO SERVE IN THAT CAPACITY ORGANIZATIONS RECEIVING FUNDING ARE REQUIRED TO SUBMIT A FINAL REPORT ONE YEAR AFTER FUNDS WERE

Additional Data

AFRO AMERICAN STUDENT

1132 28TH AVE S SUITE

MOORHEAD, MN 56560

ASSOCIATION

ALLIANCE FOR SUSTAINABILITY 225 E 26TH ST SUITE 1 TUCSON,AZ 85713

104

47-2210302

52-2094677

Software ID: Software Version:

EIN: 36-3359386

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

501(C)(3)

501(C)(3)

Name: HEADWATERS FOUNDATION FOR JUSTICE

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance or government assistance other) N/A ACCESS PHILANTHROPY 38-3777419 501(C)(3) 20,000 N/A GENERAL SUPPORT CHARITIES 2100 STEVENS AVE MINNEAPOLIS, MN 55404

9,950

10,000

N/A

N/A

PROJECT GRANT

PROJECT GRANT

N/A

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) IN/A ΔΜΔ7Ε 41-1972162 501/03/31 10.000 In /A GENERAL SUPPORT

475 CLEVELAND AVE N SUITE 322 ST PAUL, MN 55104	41 15/2102	301(0)(3)	10,000	N/A	,	SENERAL SOTT ORT
AMERICAN INDIAN	41-0997966	501(C)(3)	10,000	N/A	N/A	GENERAL SUPPORT

MOVEMENT INTERPRETIVE CENTER 1113 F FRANKLIN AVE

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

501(C)(3)

ANANYA DANCE THEATRE

MINNEAPOLIS, MN 55402

PO BOX 2427

20-4261878

SUITE 103

MINNEAPOLIS, MN 55104

17,000

N/A

PROJECT GRANT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance other) or government assistance N/A ASIAN ECONOMIC 41-1911474 501(C)(3) 10,000 IN/A PROJECT GRANT DEVELOPMENT ASSOCIATION 1821 UNIVERSITY AVE W SHITE S-202

N/A

PROJECT GRANT

N/A

SAINT PAUL, MN 55104						
AURORA ST ANTHONY NEIGHBORHOOD DEVELOPMENT CO 774 UNIVERSITY AVE W ST PAUL,MN 55104	41-1432372	501(C)(3)	10,000	N/A	N/A	GENERAL SUPPOR

9,260

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

501(C)(3)

BEMIDJI AREA INDIAN

CENTER
PO BOX 1123
BEMIDJI, MN 56619

32-0180635

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) BII GII WIIN CDLF 45-3579582 501(C)(3) 10,000 N/A IN/A PROJECT GRANT 1113 F FRANKLIN AVE MINNEADOLIS MN 55404

CENTRO DE	20 2020606	E01/C)(2)	1 5 000	N /A	N/A	DDO JECT CDANT
BREAST CANCER ACTION 55 NEW MONTGOMERY ST SAN FRANCISCO, CA 94105	94-3138992	501(C)(3)	10,000	N/A	N/A	GENERAL SUPPORT
MINNEAPOLIS, MN 33404						

MINNEAPOLIS, MN 55407

PROJECT GRANT CENTRO DE 38-3828696 501(C)(3) 15,000 IN/A TRABAIADORES UNIDOS EN LA LUCHA 2511 E FRANKLIN

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 39-1540529 501(C)(3) 10.000 N/A IN/A PROJECT GRANT COOPERATIVE DEVELOPMENT FUNDS OF CDC

145 UNIVERSITY AVE W SUITE 145 SAINT PAUL,MN 55103						
CYCLES OF CHANGE	41-1816453	501(C)(3)	10,000	N/A	N/A	PROJECT GRANT

501(C)(3)

DREAM OF WILD HEALTH

SCANDIA, MN 55073

PO BOX 68

41-1632662

/12 UNIVERSITY AVE W ST PAUL, MN 55104

10,000

N/A

IN/A

PROJECT GRANT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A FAMILY TREE INC 23-7133742 501(C)(3) 12,000 N/A PROJECT GRANT 1619 DAYTON AVE SUITE

501(C)(3)

ST CLOUD, MN 56301

394 UNIVERSITY AVE W ST PAUL, MN 55106 41-1667580

HMONG AMERICAN

PARTNERSHIP

205 SAINT PAUL, MN 55104						
GREATER MN WORKERS CENTER 2719 W DIVISION ST SUITE 103	46-3874287	501(C)(3)	10,000	N/A	N/A	GENERAL SUPPORT

10,000

N/A

GENERAL SUPPORT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A JEWISH COMMUNITY 41-1830619 501(C)(3) 35,513 N/A GENERAL SUPPORT ACTION

501(C)(3)

2375 UNIVERSITY AVE W ST PAUL, MN 55114						
KAREN ORGANIZATION OF MINNESOTA 2353 RICE ST SUITE 240 ROSEVILLE,MN 55113	30-0438142	501(C)(3)	10,000	N/A	N/A	PROJECT GRANT

15,000

N/A

PROJECT GRANT

N/A

LAO ASSISTANCE CENTER OFMN 503 IRVING AVE N STE

MINNEAPOLIS, MN 55405

100A

36-3255880

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A 501(C)(3) 10,000 N/A MAP FOR NONPROFITS 47-4008717 IGENERAL SUPPORT 165 JORDAN DR APT 19

GRANITE FALLS, MN 56241						
MEN AS PEACEMAKERS 205 W 2ND ST STE 15 DULUTH,MN 55802	41-1841689	501(C)(3)	10,000	N/A	N/A	PROJECT GRANT

CHICAGO, IL 60625

N/A 501(C)(3) 20,250 IN/A MEXICO - US SOLIDARITY 36-4435604

GENERAL SUPPORT NETWORK 3460 WIAWRENCE AVE

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) MINNESOTA TRANSGENDER 20-3776010 501(C)(3) 10,000 IN/A N/A PROJECT GRANT HEALTH COALITION 3405 CHICAGO AVE

MINNEAPOLIS,MN 55407						
NEIGHBORHOODS ORGANIZING FOR CHANGE MN 1101 W BROADWAY AVE SUITE 100 MINNEAPOLIS MN 55411	27-1408866	501(C)(3)	55,914	N/A	N/A	GENERAL SUPPORT

310 E 38TH ST

MINNEAPOLIS, MN 55409

N/A 15,000 N/A OUTFRONT MN COMMUNITY 36-3550489 501(C)(3) GENERAL SUPPORT SERVICES

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) PFUND FOUNDATION 36-3567019 501(C)(3) 12,000 N/A IN/A IGENERAL SUPPORT 1409 WILLOW ST

LIFE

1800 GLENWOOD AVE N MINNEAPOLIS, MN 55405

MINNEAPOLIS, MN 55403						
PROJECT FINE 202 W 3RD ST WINONA,MN 55987	41-1883675	501(C)(3)	9,864	N/A	N/A	GENERAL SUPPORT
REDEEMER CENTER FOR	41-1912560	501(C)(3)	10,000	N/A	N/A	PROJECT GRANT

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) RURAL RENEWABLE ENERGY 41-1999030 501(C)(3) 10,000 N/A N/A GENERAL SUPPORT

3963 8TH ST SW BACKUS,MN 56435						
TASK FORCE 1325 MASSACHUSETTS AVE NW SUITE 600	13-2772832	501(C)(3)	10,250	N/A	N/A	GENERAL SUPPORT

10,000

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

501(C)(3)

THE FOOD GROUP

8501 54TH AVE N NEW HOPE, MN 55428 41-1246504

TASK FORCE	13-2772832	501(C)(3)	10,250	N/A	N/A	GENERAL SUPPORT
1325 MASSACHUSETTS						
AVE NW SUITE 600						
600						
WASHINGTON, DC 20005						

N/A

PROJECT GRANT

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A THE POWER OF PEOPLE 26-1209294 501(C)(3) 10,000 N/A PROJECT GRANT LEADERSHIP INSTITUTE 600 - 18TH AVE N SUITE 1

GRANT

MINNEAPOLIS, MN 55411						
UNIVERSITY OF MN FOUNDATION 200 OAK ST SE SUITE 500 MINNEAPOLIS, MN 554552010	41-6042488	501(C)(3)	10,000	N/A	N/A	PROJECT G

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

MINNEAPOLIS, MN 55406

200 OAK ST SE SUITE 500
MINNEAPOLIS, MN
554552010

VOICES FOR RACIAL
JUSTICE
2525 E FRANKLIN AVE
SUITE 301

(a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization if applicable arant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) ANT

N/A

GENERAL SUPPORT

IN/A

WATERLEGACY	26-3999186	501(C)(3)	10,000	N/A	N/A	PROJECT GRAI
PO BOX 2472						
INVER GROVE, MN 55076						

9.500

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

501(C)(3)

WOMEN'S ENVIRONMENTAL

NORTH BRANCH, MN 55056

INSTITUTE PO BOX 128 20-0312344



Return Reference	Explanation
FORM 990, PART III, LINE 2	THE FOUNDATION ADDED A NEW GRANTMAKING PROGRAM CALLED THE GIVING PROJECT

Return Reference	Explanation
FORM 990, PART III, LINE 3	THE FOUNDATION CLOSED THE SOCIAL CHANGE FUND

Return Reference	Explanation
FORM 990, PART III, LINE 4A	IN FISCAL YEAR 2016, THE FOUNDATION'S GRANTMAKING PROGRAM AWARDED \$1,084,500 IN 177 GRANTS TO NONPROFIT ORGANIZATIONS MAINLY IN MINNESOTA AND WISCONSIN GRANTS ARE MADE THROUGH THE SOCIAL CHANGE FUND, CONVERGENCE PARTNERSHIP, THE FUND OF THE SACRED CIRCLE, AALF AND COMMUNITY INNOVATION GRANTING IN GENERAL, HEADWATERS FUNDING IS FOCUSED AROUND THE FOLLOWING ISSUE AREAS SOCIAL JUSTICE, ECONOMIC JUSTICE, RACIAL JUSTICE, AND ENVIRONMENTAL JUSTICE GIVING PROJECT IS AN INNOVATIVE NEW MODEL FOR FUNDING GRASSROOTS GROUPS OR PROJECTS ENGAGED IN SOCIAL CHANGE ORGANIZING TO ACHIEVE SOCIAL, ECONOMIC, ENVIRONMENTAL, AND RACIAL JUSTICE IN DIVERSE COMMUNITIES THROUGHOUT MINNESOTA IN FISCAL YEAR 2016, THE GIVING PROJECT AWARDED \$120,800 IN 12 GRANTS EMERGENCY FUND FOR BLACK LIVES IS A SHORT TERM TEMPORARY FUND MAKING GENERAL OPERATING GRANTS TO BLACK LIVES MATTER MINNEAPOLIS AND NEIGHBORHOODS ORGANIZING FOR CHANGE \$104,800 IN GRANTS TO TWO GRANTEES THE FUND OF THE SACRED CIRCLE IS DIRECTED TOWARD AMERICAN INDIAN LED GRASSROOTS GROUPS OR PROJECTS IN MINNESOTA AND WISCONSIN ADDRESSING ISSUES OF INJUSTICE IN NATIVE COMMUNITIES THE FUND REAFFIRMS THE SELF-DETERMINATION OF AMERICAN INDIANS TO DEFINE AND ADDRESS THE NEEDS OF THEIR COMMUNITIES IN CULTURALLY APPROPRIATE WAYS IN FISCAL YEAR 2016, THE FUND OF THE SACRED CIRCLE AWARDED \$40,000 IN FIVE GRANTS COMMUNITY INNOVATION GRANTING IS A NEW PROGRAM FOR HEADWATERS IN COLLABORATION WITH THE BUSH FOUNDATION THE GRANTS PROGRAM IS SET UP TO SUPPORT COMMUNITY PROBLEM SOLVING IN MINNESOTA \$410,500 WAS AWARDED IN 42 GRANTS DONOR ADVISED FUNDS ENABLE INDIVIDUAL DONORS TO ADVANCE THEIR PHILANTHROPIC GOALS AND DIRECT RESOURCES TO SOCIAL CHANGE GROUPS LOCALLY, NATIONALLY, AND INTERNATIONALLY HEADWATERS STAFF EDUCATE DONORS ABOUT SOCIAL INJUSTICE ISSUES, CONNECT THEM TO ORGANIZATIONS THAT MATCH THEIR INTERESTS, AND PROVIDE TECHNICAL GRANTMAKING ASSISTANCE IN FISCAL YEAR 2016, HEADWATERS ALLOCATED \$40,800 IN 107 DONOR ADVISED GRANTS

Return Reference	Explanation
FORM 990, PART VI,	THE EXECUTIVE COMMITTEE IS COMPRISED OF THE BOARD OFFICERS AND UP TO TWO AT-LARGE MEMBERS FROM
SECTION A, LINE 1	THE BOARD OF DIRECTORS THE COMMITTEE MAY ACT ON BEHALF OF THE BOARD IF A FULL BOARD MEETING
	CANNOT REASONABLY BE CONVENED

Return Reference	Explanation
FORM 990, PART VI, SECTION	THE FINANCE COMMITTEE REVIEWS THE PREPARED FORM 990 AND THEN FORWARDS TO THE FULL BOARD
B, LINE 11	FOR THEIR CONSIDERATION AND APPROVAL

	Explanation	Return Reference
AS NEW BOARD AND KEY STAFF MEMBERS JOIN THE ORGANIZATION, THEY COMPLETE THE CONFLICT OF INTEREST FOR PART VI, SECTION B, SUMMARY OF THE CONFLICTS IS GIVEN TO THE BOARD CO-CHAIRS ANY CONTRACTS OR PAYMENTS MADE TO/WITH DIRECTORS MUST BE APPROVED BY THE BOARD IF ANY CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF INTEREST ARISES AFTER THE ANNUAL FORM IS FILLED OUT, THE INTERESTED DIRECTOR OR ANY DIRECTOR WITH KNOWLEDGE OF SUCH CONFLICT OF INTEREST WHEN THERE IS DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY A VOTE OF THE BOARD, EXCLUDING THE PERSON WHO IS THE SUBJECT OF THE POSSIBLE CONFLICT OF INTEREST IF A CONFLICT OF INTEREST DOES EXIST, THE BOARD MAY STILL AUTHORIZE, APPROVE, OR RATIFY A CONTRACT OR TRANSACTION IN GOOD FAITH BY THE AFTIRMATIVE VOTE OF A MAJORITY OF DIRECTORS, WITH CONFLICTED BOARD MEMBER ABSTAINING FROM THE VOTE. THE DIRECTOR WHO HAS A CONFLICT SHALL NOT PARTICIPATE IN THE BOARD'S DISCUSSION OF THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND QUESTIONS SUCH PERSON SHALL NOT ATTEMPT TO EXERT THE DIRECTOR HAVING SUCH A CONFLICT SHALL NOT PARTICIPATE IN THE MATTER, EITHER AT OR OUTSIDE THE MEETING. THE DIRECTOR HAVING SUCH A CONFLICT SHALL NOT PARTICIPATE IN THE BOARD IS MEETING AFTER PROVIDING THE BOARD WITH ANY AND ALL RELEVANT INFORMATION. ANY DIRECTOR DISCLOSING A CONFLICT OF INTEREST MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM AT A MEETING OF THE BOARD OR A COMMITTEE THEREOF. THE MINITERS OF THE MEETING OF THE BOARD OR COMMITTEE SHAREFLECT THAT THE CONFLICT OF INTEREST WAS DISCLOSED AND THAT THE INTERESTED DIRECTOR WAS NOT PRESENT DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VOTE ON THE MATTER.	Y STAFF MEMBERS COMPLETE THE CONFLICT OF INTEREST FORMS A HE BOARD CO-CHAIRS ANY CONTRACTS OR PAYMENTS MADE TO/WITH IRD IF ANY CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF INTEREST DUT, THE INTERESTED DIRECTOR OR ANY DIRECTOR WITH KNOWLEDGE OF NTION OF THE BOARD PRIOR TO BOARD ACTION ON A DECISION INVOLVING DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER ARD, EXCLUDING THE PERSON WHO IS THE SUBJECT OF THE POSSIBLE TEREST DOES EXIST, THE BOARD MAY STILL AUTHORIZE, APPROVE, OR DOD FAITH BY THE AFFIRMATIVE VOTE OF A MAJORITY OF DIRECTORS, WITH G FROM THE VOTE THE DIRECTOR WHO HAS A CONFLICT SHALL NOT THE MATTER EXCEPT TO DISCLOSE MATERIAL FACTS AND TO RESPOND TO MPT TO EXERT HIS OR HER PERSONAL INFLUENCE WITH RESPECT TO THE G THE MATTER UNDER CONSIDERATION AND SHALL RETIRE FROM THE ROOM VIDING THE BOARD WITH ANY AND ALL RELEVANT INFORMATION ANY EST MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM AT A BEREOF THE MINUTES OF THE MEETING OF THE BOARD OR COMMITTEE SHALL VAS DISCLOSED AND THAT THE INTERESTED DIRECTOR WAS NOT PRESENT	PART VI, SECTION B,

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	IN REVIEWING AND APPROVING THE COMPENSATION OF THE EXECUTIVE DIRECTOR, THE EXECUTIVE COMMITTEE OF THE HEADWATERS BOARD OF DIRECTORS UTILIZES THE FOLLOWING PROCESS 1 IMPARTIAL DECISION MAKERS - THE COMPENSATION ARRANGEMENT MUST BE APPROVED IN ADVANCE (BEFORE ANY PAYMENT IS MADE) BY THE EXECUTIVE COMMITTEE COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT 2 COMPARABILITY DATA - WHEN THE EXECUTIVE COMMITTEE IS CONSIDERING COMPENSATION OF THE EXECUTIVE DIRECTOR, IT MUST RELY ON COMPARABILITY DATA THAT DEMONSTRATES THE FAIR VALUE OF THE COMPENSATION IN QUESTION THIS DATA MAY INCLUDE THE FOLLOWING - EXPERT COMPENSATION STUDIES BY INDEPENDENT FIRMS, - WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS, - DOCUMENTED TELEPHONE CALLS AND EMAILS ABOUT SIMILAR POSITIONS AT BOTH NON-PROFIT AND FOR-PROFIT ORGANIZATIONS, - INFORMATION OBTAINED FROM THE IRS FORM 990 FILINGS OF SIMILAR ORGANIZATIONS, - USE OF SALARY SURVEYS OF THE NONPROFIT AND FOUNDATION SECTOR BOARD PROCESS AND FINAL DECISIONS DOCUMENTED THROUGH BOARD MINUTES A COMPENSATION REVIEW WAS DONE IN 2015 FOR THE EXECUTIVE DIRECTOR, DAVID NICHOLSON BY THE EXECUTIVE COMMITTEE A COMPENSATION REVIEW WAS DONE IN 2015 FOR THE ASSOCIATE EXECUTIVE DIRECTOR, MARIA DE LA CRUZ, BY THE EXECUTIVE DIRECTOR

Return Reference	Explanation
,	THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE ON THE WEBSITE, FOR PERSONAL INSPECTION IN THE OFFICE, OR MAILED UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN BENEFICIAL INTEREST IN THE MINNEAPOLIS FOUNDATION -19,656