	990-T	E			ation Busin				Return	า		OMB No. 1545-0	687
Form	JJU-1				xy tax under		ion 6033(					2012	
Departm	ent of the Treasury				other tax year begi			′	12, and		Ope	n to Public Inspe	ction for
	Revenue Service	'	ending	, 20			See separate		ons.			n to Public Inspec (c)(3) Organizatio	
	Check box if address changed		Name of organizatior	·	Check box if name ch	anged a	and see instructi	ons.)				r identification n es' trust, see instru	
	pt under section	Print	Minnesota Ground							(ட1			10110113.)
	01( c )( 4 )	or		room or	r suite no. If a P.O. box	, see ins	structions.			E 11-		1-1434403	
	)8(e) 220(e)	Туре	4779 126th St N									business activity actions)	/ codes
	)8A 🗌 530(a)		City or town, state, a							, i		1	
			White Bear Lake N							5	641860	0 4532	220
at en	value of all assets d of year				(see instructions)			al ( _ ) . I		1 404	(-) +		
					► ✓ 501(c) corp			1(c) trus		401	(a) tru	st 📋 Othe	r trust
					usiness activity.								7.81
					/ in an affiliated gro			diary cor	ntrolled g	roup?	• •		∕] No
					the parent corpora	tion.							
			Dr. Jeanette H					· · ·	e numbe			651-276-820	8
Part			e or Business I	ncon	ne		(A) Incon	ne	(B) Ex	pense	S	(C) Net	
1a	Gross receipts												
b	Less returns and				<b>c</b> Balance ►	1c							
2	-		Schedule A, line 7)			2							
3	•		line 2 from line 1			3							
4a			ne (attach Schedu			4a		_					-
b		-	1797, Part II, line 1			4b							
_c	-		n for trusts			4c							_
5		-	erships and S corpo			5	-	_					_
6			le C)			6	-						
7			ed income (Sche			7	-	_					_
8			-		from controlled								
-	-	-	ule F)			8							
9					)(7), (9), or (17								
	organization (		,			9							
10			ivity income (Sche			10							
11	0	•	Schedule J)			11	\$3,72	4 50	\$	1,381	96	\$2,342	2 54
12			ructions; attach sta			12		_					
13	Total. Combin					13	\$3,72			1,381	96	\$2,342	2 54
Part				•	e instructions for I with the unrelate				s) (exce	pt ior	COIII	noutions,	
											4.4		
14	•				stees (Schedule K)						14		
15	Salaries and v	0									15		
16											16		
17											17		
18 10											18		
19 20											19		
20					limitation rules) .			• •		•	20		
21			,								001		
22	•				d elsewhere on re						22b		
23											23		
24					IS						24		
25											25		
26											26		
27											27	\$2,342	2 54
28											28		
29											29		
30					t operating loss de						30		
31					amount on line 30)						31		
32				-	pecific deduction.						32		
33					e line 33 instructio						33	\$1,000	00 00
34					act line 33 from li								
	enter the sma	ner of Ze	=100 or line $32$ .	• •		• •				•	34	(	)

Form 990-T (2012)

Part I	II Ta	ax Computation									
35	Organi	zations taxable as corpo	rations (see instruc	ctions for	tax computati	ion). Controlled grou	qu				
	membe	rs (sections 1561 and 1563	3) check here 🕨 🗌	See instr	uctions and:						
а		our share of the \$50,000, \$				ckets (in that order):	and the second sec				
	(1) \$	(2)		(3)			1.1.1.4				
b		rganization's share of: (1) A				\$	- 1- F				
2		itional 3% tax (not more the				\$					
0	~ ~	tax on the amount on line					► 35c				
с 36		taxable at trust rate									
50		ount on line 34 from: Ta									
07							36				
37		ax (see instructions)					► <u>37</u>				
38		ive minimum tax					38				
39		dd lines 37 and 38 to line	35c or 36, whicheve	r applies			39				
Part I		ax and Payments									
40a		tax credit (corporations attac				40a					
b		redits (see instructions) .				40b	1.5.5				
С		business credit. Attach Fo				40c	1996				
d		or prior year minimum tax (		,		40d	10				
е		redits. Add lines 40a throu					40e				
41		t line 40e from line 39 .					41				
42	Other tax	kes. Check if from: 🗌 Form 42	255 🗌 Form 8611 🗌 F	orm 8697	] Form 8866 🗌	Other (attach statement).	42				
43	Total ta	x. Add lines 41 and 42 .				بر ب ب ب ب ب	43				
44a	Paymer	nts: A 2011 overpayment ci	redited to 2012 .			44a	100				
b	2012 es	stimated tax payments .				44b					
с	Tax dep	osited with Form 8868 .				44c	A CONTRACTOR				
d	Foreign	organizations: Tax paid or	withheld at source	(see instru	ctions) .	44d	1-1-1-1-				
е	Backup	withholding (see instructio	ons)			44e	E And				
f	Credit f	or small employer health in	surance premiums (	Attach For	m 8941) .	44f	Permin				
g	Other c	redits and payments:	Form 2439				11. 6				
	Form	4136	Other		Total 🕨	44g	n alis				
45	Total p	ayments. Add lines 44a th	rough 44g				45				
46		ed tax penalty (see instruct					46				
47		e. If line 45 is less than the					▶ 47				
48		yment. If line 45 is larger t					▶ 48				
49		amount of line 48 you want:				Refunded	▶ 49				
Part	V St	atements Regarding C	ertain Activities	and Othe	r Informatio	n (see instructions)					
1	At any	time during the 2012	calendar year, die	d the org	anization ha	ve an interest in	or a sign	ature Yo	es No		
		er authority over a f							34 - Say		
		s," the organization ma							業にため		
	Financi	al Accounts. If "Yes," enter	the name of the for	eign count	ry here 🕨				1		
2	During t	ne tax year, did the organization	on receive a distributio	n from, or v	vas it the granto	or of, or transferor to, a	foreign trust	?.	1		
	If "Yes,	' see instructions for other	forms the organizati	on may ha	ve to file.			100	48555		
3		e amount of tax-exempt in	-			ar 🕨 \$		0	The Man		
Sched		-Cost of Goods Sold. E									
1	Invento	ry at beginning of year	1 2,601	94 6	Inventory at	end of year	6	2,5	78 01		
2	Purcha		2	7	Cost of g	oods sold. Subtra	ct				
3	Cost of	labor	3		line 6 from	line 5. Enter here ar	nd				
4a	Additio	nal section 263A costs			in Part I, lin	e2	7				
	(attach	statement)	4a	8	Do the rule	s of section 263A	(with respe	ct to Y	es No		
b	Other c	osts (attach statement)	4b 23	93		oduced or acquired	1		3- 5-0-		
5		dd lines 1 through 4b	5 2,578	01	to the organ				1		
	Under p	enalties of perjury, I declare that I hav	e examined this return, inclu	uding accompa	anying schedules ar	nd statements, and to the be		adge and beliv			
Sign	correct,	and complete. Declaration of prepare	r (other than taxpayer) is ba	sed on all infor	mation of which pre	eparer has any knowledge.	May the	IRS discuss t	this return		
Here	1	udrust Van	Cen 17	3012	Treasurer		with the	preparer sho	wn below		
		ire of officer	Dại	e	Title		(see instr	uctions)? 才 Y	res∐No		
Doid		Print/Type preparer's name	Preparers	signature 🖌	1. 11 1	/ Date /	Check	PTIN			
Paid		Jeanctle H. Leete	-10	and	6 SI. Me	to 7/30/2012	self-employe		17508		
Prepa			ation Mgmt Co				Firm's EIN ►		571648		
Use (	only	Firm's address ► 4779 126th		MN 55110-	5910		Phone no.		6-8208		

Page 2

Total

## Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

(see instructions)		
1. Description of property		
(1)		
(2)		
(3)		
(4)		
2. Rent receiv	ed or accrued	
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</b> From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach statement)
(1)		
(2)		
(3)		
(4)		

(b) Total deductions.

Enter here and on page 1, Part I, line 6, column (B) ►

(c) Total income. Add to	otals of columns 2(a)	and 2(b). Enter	
here and on page 1, Part	t I, line 6, column (A)	🕨	
<u></u>			

## Schedule E-Unrelated Debt-Financed Income (see instructions)

Total

	1 Description of de	bt-financed property	2. Gross income from or allocable to debt-financed	3. Deductions directly connected with or allocable to debt-financed property					
	L Description of de		property	(a) Straight line depreciation (attach statement)	(b) Other deductions (attach statement)				
(1)									
(2)									
(3)									
(4)									
	<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach statement)</li> </ol>	5. Average adjusted basis of or allocable to debt-financed property (attach statement)	<b>6.</b> Column 4 divided by column 5	<b>7.</b> Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))				
(1)			%						
(2)			%						
(3)			%						
(4)			%						
				Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).				

Totals																					.					
Total div	/ide	end	s-re	ece	ive	d de	edu	ctio	ons	inc	lude	ed i	n c	olur	mn	8										

## Schedule F-Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Exempt Controlled Organizations

			- J		
	1. Name of controlled organization	3. Net unrelated income (loss) (see instructions)	navmonte mado	<b>5.</b> Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

## Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	<b>9.</b> Total of specified payments made	<b>10.</b> Part of column 9 that is included in the controlling organization's gross income	<b>11.</b> Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals				

Schedule G-Investment Inco	me of a Section	501(c)	)(7), (9),	or (17) Organi	zation (see inst	ruction	s)	
1. Description of income	2. Amount of inco		3. direc	Deductions otly connected ach statement)	<b>4.</b> Set-asides (attach stateme	3	5. To and se	tal deductions et-asides (col. 3 blus col. 4)
(1)								
(2)								
(3)								
(4)								
	Enter here and on p Part I, line 9, colur						Enter her Part I, lir	re and on page 1, ne 9, column (B).
Totals								
Schedule I-Exploited Exempt	Activity Incom	e, Othe	er Than	Advertising In	come (see inst	ruction	s)	
•		Ĺ		4. Net income	,		,	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	dir conne produ unr	penses rectly cted with uction of elated ss income	(loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	attribu	penses utable to umn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
	Enter here and on page 1, Part I, line 10, col. (A).	page	ere and on 1, Part I, I, col. (B).					Enter here and on page 1, Part II, line 26.
Totals								
Schedule J-Advertising Incor								
Part I Income From Perio	dicals Reported	on a (	Consoli	dated Basis				
1. Name of periodical	<b>2.</b> Gross advertising income		Direct sing costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		adership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) MGWA Newsletter	2,694.50		879.30		400.00		4,370.36	
(2) MGWA Directory	750.00		112.79	-	98.00		587.41	
(3) MGWA Web Page	280.00		394.85	-	90.00		2,142.15	
(4)	200.00		374.03				2,142.15	
Tetele (commute Dert II line (5))				10 0 / 0 T /	± 100 00			** * * * *
Totals (carry to Part II, line (5))         Part II       Income From Period			\$1,381.96 Soporat	\$2,342.54	\$498.00		\$7,567.70	\$2,342.54
Part II Income From Period through 7 on a line-by-		ona	Separat	e basis (For ea	ch periodical list	ea in P	art II, IIII I	n columns 2
1. Name of periodical	<b>2.</b> Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		adership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals from Part I	\$3,724.50		\$1,381.96					\$2,342.54
	Enter here and on page 1, Part I, line 11, col. (A).	Enter he page	ere and on 1, Part I, , col. (B).					Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	\$3,724.50		\$1,381.96					\$2,342.54
Schedule K-Compensation o	f Officers, Direc	tors, a	and Tru	<b>stees</b> (see instru		-		
<b>1.</b> Name			2	2. Title	3. Percent of time devoted to business	4. (		on attributable to d business
(1)					9	6		
(2)					9			
(3)					9	-		
(4)					9	-		
Total. Enter here and on page 1, Part II,	line 14					•		