** PUBLIC DISCLOSURE COPY **

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

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

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

A F	or the	$\underline{2020}$ calendar year, or tax year beginning $\underline{APR} \ 1$, $\underline{2020}$ and	ending N	<u>IAR 31, 2021</u>	
	heck if pplicable	AMERICAN CIVIL LIBERTIES UNION OF		D Employer identific	cation number
	Addres change	MINNESOTA			
	Name change	Doing business as		47-44846	02
	Initial return	Number and street (or P.0. box if mail is not delivered to street address) PO BOX 14720	Room/suite	E Telephone number 651-529-3	
_	⊒return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,929,759.
	Amend			H(a) Is this a group re	
H	∐return ∏Applica			for subordinates	
	⊥tion pendin	SAME AS C ABOVE			·····= =
				H(b) Are all subordinates in	
		mpt status:501(c)(3) _ X _ 501(c) (_ 4 _) ◀ _ (insert no.) 4947(a)(1) (or 527	1 '	list. See instructions
_		e: ► WWW.ACLU-MN.ORG	1	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 1954 N	1 State of legal domicile; MN
P		Summary		011 111D DD016	
Ф		Briefly describe the organization's mission or most significant activities: PRESI	ERVATT	ON AND PROMO	OTTON OF
Governance		CIVIL RIGHTS AND CIVIL LIBERTIES.			
ž	l	Check this box 🕨 🔛 if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	
Š	1			3	26
	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	26
Se Se	5	otal number of individuals employed in calendar year 2020 (Part V, line 2a)		5	29
Activities &	6	otal number of volunteers (estimate if necessary)		6	1500
ĊĖ	7a 7	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	1 d	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
ø.	8 (Contributions and grants (Part VIII, line 1h)		1,296,409.	1,855,871.
Ž	9 F	Program service revenue (Part VIII, line 2g)		1,985.	70,000.
Revenue	10 I	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		14.	88.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	3,800.
	l .	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,298,408.	1,929,759.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	l	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
w	45 6	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		289,514.	313,587.
Expenses	 16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
<u>B</u>	ь-	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ŭ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		164,415.	191,315.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		453,929.	504,902.
		Revenue less expenses. Subtract line 18 from line 12		844,479.	1,424,857.
Or es			Be	ginning of Current Year	End of Year
Net Assets or	20	otal assets (Part X, line 16)		2,675,014.	4,094,912.
ASS	21	Total liabilities (Part X. line 26)		5,427.	468.
Net I	22	Net assets or fund balances. Subtract line 21 from line 20		2,669,587.	4,094,444.
	rt II	Signature Block		, ,	, ,
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of wh			,
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Sig	,	Signature of officer		Date	
Her	1	BENJAMIN FEIST, INTERIM EXECUTIVE DIRE	CTOR		
	~	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	, ,	MICHAEL J PETERSON, CPA MICHAEL J PETERS	SON O	2/09/22 if self-employ	
		Firm's name WIPFLI LLP	, J. 1, O		39-0758449
	Only	Firm's address 5 1502 LONDON ROAD, SUITE 200		I IIIII 3 LIIV	0,00447
J36	Jy	DULUTH, MN 55812		Dhone no 21	8.722.4705
Max	the ID	S discuss this return with the preparer shown above? See instructions		FIIOHE IIO. 4 1	X Yes No

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA IS TO
	PROTECT THE CIVIL LIBERTIES OF ALL MINNESOTANS THROUGH LITIGATION,
	PUBLIC EDUCATION, AND LOBBYING.
2	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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
 4а	revenue, if any, for each program service reported. (Code:) (Expenses \$ 251,610 • including grants of \$ 0 •) (Revenue \$)
4 a	LEGISLATIVE PROGRAM:
	BY DRAFTING EFFECTIVE LEGISLATION AND TESTIFYING ON BILLS WITH CIVIL
	LIBERTIES IMPLICATIONS, THE ORGANIZATION ENSURES THAT THE GOVERNMENT
	DOES NOT SUCCEED IN INFRINGING ON INDIVIDUALS' RIGHTS.
4b	(Code:) (Expenses \$
	COMMUNITY ENGAGEMENT PROGRAM:
	EDUCATING AND ENGAGING THE PUBLIC IS KEY TO THE ORGANIZATION'S MISSION.
	THE ORGANIZATION SEEKS TO EDUCATE MINNESOTANS ABOUT THEIR CIVIL LIBERTIES BY PROVIDING SCHOOLS WITH EDUCATIONAL MATERIALS, BY SPEAKING
	IN PUBLIC ON CIVIL LIBERTIES, AND BY MOBILIZING INDIVIDUALS TO
	PERSONALLY ADVOCATE FOR THEIR RIGHTS.
	I DROUMDET TOVOCHIE FOR THEIR REGISTOR
4c	(Code:) (Expenses \$73,266 . including grants of \$0 . (Revenue \$70,000 .)
	LEGAL PROGRAM:
	THE ORGANIZATION PROTECTS INDIVIDUALS' CIVIL RIGHTS BY SELECTING,
	NEGOTIATING, AND TRYING CASES WITH THE POTENTIAL TO ESTABLISH LEGAL
	PRECEDENT, BROADEN INTERPRETATION, AND STRENGTHEN CIVIL LIBERTIES. THE
	ORGANIZATION IS SUPPORTED BY VOLUNTEER ATTORNEYS WHO DONATE THEIR TIME
	AND EXPERTISE TO THE ORGANIZATION'S CAUSE.
4d	Other program services (Describe on Schedule O.)
·u	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 402,610.
	Form 990 (2020)

AMERICAN CIVIL LIBERTIES UNION OF

Form 990 (2020)

MINNESOTA

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			.,
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			.,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			.,
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	37
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f			37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	١		- T
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	v	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
а	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	146		х
46	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10		16		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
• •		17		x
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	"		
		19		х
202	complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		х

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AMERICAN CIVIL LIBERTIES UNION OF

Form 990 (2020) MINNESOTA

Part IV Checklist of Required Schedules (continued) 47-4484602 Page 4

			Yes	No
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete			
	Schedule J	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
·	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
02	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- C-		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
٠,	Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	100		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
		38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
			ΩΩΩ	(2020)

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Form 990 (2020) MINNESOTA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Continued)				Vaa	Na
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	l	I		Yes	No
Za	filed for the calendar year ending with or within the year covered by this return	2a	29			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	х	
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
За	Did the appropriation have proported by since a great income of \$1,000 an arrange during the great	,		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accoun	it)?	4a		_X_
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	ccoun	ts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		_ <u>X</u> _
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit			v
	any contributions that were not tax deductible as charitable contributions?			6a		_X_
D	If "Yes," did the organization include with every solicitation an express statement that such contributions and tox deductible?		giπs	G.L.		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices n	rovided to the navor2	7a		
	TENNA II I'I II		Tovided to the payor:	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
•	to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	-10	I			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	I			
	Gross income from members or shareholders	11a	I			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1.14				
-	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı	ı			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c	<u> </u>			7.7
				14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			45		Х
	excess parachute payment(s) during the year?			15		21
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incon	ne?	16		Х
.0	If "Yes," complete Form 4720, Schedule O.	. 11 10011		-10		
				_	000	(0000)

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

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	26			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any oth	ier			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
			I	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х
6	Did the organization have members or stockholders?		Г	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?	•		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?	•		7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea					
а	The governing body?	-	· .	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		Г	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code)				
	(This decision is requested information assure policies not required by the internal ne	venue ooue.,			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
		,		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body		· · · · · · · · · · · · · · · · · · ·	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	_				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y		Г			
	in Schedule O how this was done	,		12c	Х	
13	Did the organization have a written whistleblower policy?		Γ	13	Х	
14	Did the organization have a written document retention and destruction policy?		Г	14	Х	
15	Did the process for determining compensation of the following persons include a review and approva					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent with a				
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure		•			
17	List the states with which a copy of this Form 990 is required to be filed ▶MN					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990-T (Sec	tion 501(c)(3)s	only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.		. , , , ,	,,		
	X Own website Another's website X Upon request Other (explain	on Schedule	: O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial	
	statements available to the public during the tax year.		. ,,			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and recor	ds >			
	BARBARA CLARE - 651-529-1697					
	PO BOX 14720, MINNEAPOLIS, MN 55414					

Form **990** (2020)

Form 990 (2020) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

• 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.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not c , unle:	Posi heck i ss per nd a di	more son i	than s bot	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JOHN GORDON	4.00			3,7				122 067	0	7 256
EXECUTIVE DIRECTOR	36.00		_	Х				132,067.	0.	7,356.
(2) SARAH HEIL	38.00	1		х				02 217	0.	2 762
(3) NICOLE MOEN	1.00			Λ				92,217.	0.	3,762.
CHAIR	1.00	Х		х				0.	0.	0.
(4) SCOTT FLAHERTY	1.00	^		Δ.		\vdash	-	1	0.	U •
VICE CHAIR	1.00	Х		х				0.	0.	0.
(5) CASSANDRA WARNER	1.00	22		22				0.		0.
TREASURER	1.00	х		х				0.	0.	0.
(6) LARISS MALDONADO	1.00									
SECRETARY		х		х				0.	0.	0.
(7) JONATHAN ABRAM	1.00								•	
BOARD MEMBER	1.00	Х						0.	0.	0.
(8) HOWARD BASS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) SHIRA BURTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) JUNE CARBONE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) RONALD DEHARPPORTE	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(12) MICHAEL ELLIOTT	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) ALBERT GOINS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) MICHELE GOODWIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) JOSEPH GREEN	1.00	. .							_	_
BOARD MEMBER		Х	_			_		0.	0.	0.
(16) TIMOTHY GRIFFIN	1.00									_
BOARD MEMBER	1 00	Х	_					0.	0.	0.
(17) JEFF HOLLAND	1.00								_	_
BOARD MEMBER		Х						0.	0.	0 . Form 990 (2020)

Form **990** (2020)

Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	Hig	ghes	st C	ompensated Employee	s (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average	(do		Posi	ition		200	Reportable	Reportable	Estimated
	hours per	box	not cl , unles	s per	son i	s both	n an	compensation	compensation	amount of
	week		cer an	d a di	recto	r/trus	tee)	from	from related	other
	(list any	director						the	organizations	compensation
	hours for related	or di	e l			ated		organization	(W-2/1099-MISC)	from the
	organizations	ustee	trust		9	Suedu		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		ploye	st con	_			organizations
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) JEAN HOLLOWAY	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(19) RACHEL HUGHEY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(20) KEITH JACKSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(21) KATHY JUNEK	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(22) RALEIGH LEVINE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(23) COLLEEN MCGARRY	1.00	l								
BOARD MEMBER	1 00	Х						0.	0.	0.
(24) JOHN C MILLER	1.00	٦,							0	
BOARD MEMBER	1.00	Х	Н					0.	0.	0.
(25) MAI MOUA	1.00	х						0.	0.	
BOARD MEMBER (26) WILLIAM PENTELOVITCH	1.00	Λ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
4h Cubtatal		•				l		224,284.	0.	
c Total from continuation sheets to Part VII								0.	0.	
d Total (add lines 1b and 1c)								224,284.	0.	
Total number of individuals (including but no							o re	· · · · · · · · · · · · · · · · · · ·		
compensation from the organization						,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	555 51.5p5.1a5.5	1
										Yes No
3 Did the organization list any former officer,	director, truste	ee, k	кеу е	mpl	oye	e, or	hig	hest compensated empl	oyee on	
line 1a? If "Yes," complete Schedule J for st	uch individual									3 X
4 For any individual listed on line 1a, is the su	m of reportable	е со	mpe	nsa	tion	and	oth	ner compensation from the	ne organization	
and related organizations greater than \$150	,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual		4 X
5 Did any person listed on line 1a receive or a	•				•			•		
rendered to the organization? If "Yes." com	plete Schedule	Jf	or su	ch r	oers	on .				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest countries the organization. Report compensation for the organization.	•	•								ation from
(A)	ne calendar ye	Jai C	i IUII I	y w	iti i C	JI VVI	<u> </u>	(B)	cai.	(C)
Name and business	address	NC	ONE	:				Description of s	ervices	Compensation
O Tabel work (i.e. i.e. i.e. i.e.	and the second							-1	His are	
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot IIn	nited	to t	thos (ted	above) who received mo	ore than	
SEE PART VII, SECTION		IN	UA'	ΤΙ	_		HE	ETS		Form 990 (2020)

Form 990 MINNESOTA 47-4484602

orm 990 MINNESOTA									47-448	
Part VII Section A. Officers, Directors, True	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)	
(A) Name and title	(B) Average hours	(cl	neck	Pos	C) ition that		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) RANDY TIETJEN	1.00	l								
OARD MEMBER	1 00	Х						0.	0.	0
28) CATHERINE WASSBERG	1.00	х						0.	0.	0
OARD MEMBER		Λ						0.	0.	

Form 990 (2020) MINNESO
Part VIII Statement of Revenue

_		Check if Schedule O contains a response or	note to any lin	e in this Part VIII			
		•	,	(A)	(B)	(C)	_ (D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
(O (O	4 .	a Federated campaigns 1a					
ant	' '		30,353.	-			
je g	'		30,333.				
fts, Ar	l '						
Contributions, Gifts, Grants and Other Similar Amounts	,			-			
ns, Sim		e Government grants (contributions) 1e		-			
utio er (1	f All other contributions, gifts, grants, and	OF E10				
들됨			25,518.	-			
ont od (!	g Noncash contributions included in lines 1a-1f		1 055 071			
<u>0</u> 8		h Total. Add lines 1a-1f		1,855,871.			
			Business Code	70.000	70.000		
ce	2 :	a ATTORNEY FEES AWARDED	541100	70,000.	70,000.		
ř vi		b					
Sen	•	c					
ran Jev		d					
Program Service Revenue		e					
ď	1	f All other program service revenue					
		g Total. Add lines 2a-2f		70,000.			
	3	Investment income (including dividends, interest	, and				
		other similar amounts)		88.			88.
	4	Income from investment of tax-exempt bond pro					
	5	Royalties	>				
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		b Less: cost or other basis					
<u>o</u>		and sales expenses 7b					
her Revenue		c Gain or (loss) 7c					
ev.		d Net gain or (loss)	•				
er F		a Gross income from fundraising events (not					
Ğ	•	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events					
		a Gross income from gaming activities. See					
	3 (Part IV, line 19 9a					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
		a Gross sales of inventory, less returns					
	10 4	3.					
		and allowances 10a		-			
		b Less: cost of goods sold 10b					
	•	c Net income or (loss) from sales of inventory	Pusiness Ond				
જ		-	Business Code				
eor Te	11 :						
Miscellaneous Revenue		ь					
Sev Sev	(C	000000	2 000			2 000
Σ	•	_	900099	3,800.			3,800.
		e Total. Add lines 11a-11d		3,800.	70 000	^	2 000
	12	Total revenue. See instructions		1,929,759.	70,000.	0.	3,888.

ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All other	r organizations must con	plete column (A).	
	Check if Schedule O contains a respons		his Part IX		(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	19,214.	17,619.	1,595.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	199,864.	184,089.	15,775.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	6,099.	5,118.	981.	
9	Other employee benefits	69,892.	58,416.	11,476.	
10	Payroll taxes	18,518.	15,141.	3,377.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	14,823.		14,823.	
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 Sch 0.)	78,059.	72,657.	5,402.	
12	Advertising and promotion	3,787.	3,787.		
13	Office expenses	12,672.	1,463.	11,209.	
14	Information technology	3,296.	3,296.		
15	Royalties				
16	Occupancy	39,958.	38,053.	1,905.	
17	Travel	450.	450.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	34,355.		34,355.	
20	Interest	55.		55.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,339.		1,339.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	STAFF AND VOLUNTEERS	1,534.	1,534.		
b	MEMBERSHIP DUES	987.	987.		
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	504,902.	402,610.	102,292.	0.
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)				
032010) 12-23-20				Form 990 (2020)

Form **990** (2020)

Form 990 (2020)
Part X Balance Sheet

Part	τx	Balance Sneet				
		Check if Schedule O contains a response or	note to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		124,144.	2	114,115
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	93,425.	4	155,083	
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, su	bstantial contributor, or 35%			
		controlled entity or family member of any of t	hese persons		5	
	6	Loans and other receivables from other disqu	. `			
		under section 4958(f)(1)), and persons describ		6		
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		8		
⋖	9	Prepaid expenses and deferred charges		4,166.	9	7,274
	10a	Land, buildings, and equipment: cost or othe	1 I			
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation		10c		
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, lin		12		
	13	Investments - program-related. See Part IV, lin		13		
	14	Intangible assets		0 450 050	14	2 212 442
	15	Other assets. See Part IV, line 11	2,453,279.	15	3,818,440	
4	16	Total assets. Add lines 1 through 15 (must e		2,675,014.	16	4,094,912
	17	Accounts payable and accrued expenses	5,427.	17	468	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
es	22	Loans and other payables to any current or fo				
≣		trustee, key employee, creator or founder, su				
Liabilities		controlled entity or family member of any of t	***************************************		22	
	23	Secured mortgages and notes payable to uni			23	
- 1	24	Unsecured notes and loans payable to unrela			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on line	nes 17-24). Complete Part X		25	
	06	of Schedule D		5,427.	26	468
+	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, or		5,427.	20	1 00
S		and complete lines 27, 28, 32, and 33.	THECK HEIE			
2	27			2,669,587.	27	4,094,444
3ala	28	Net assets with donor restrictions		2700373071	28	1,031,111
<u> </u>	20	Organizations that do not follow FASB ASC			20	
ᆵ		and complete lines 29 through 33.	5 556, Check here			
ğ	29	Capital stock or trust principal, or current fun	ds		29	
ets	30	Paid-in or capital surplus, or land, building, or			30	
Ass	31	Retained earnings, endowment, accumulated			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		2,669,587.	32	4,094,444
z	33	Total liabilities and net assets/fund balances		2,675,014.	33	4,094,912

Form **990** (2020)

Form 990 (2020) MINNESOTA 47-4484602 Page 12

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,92	9,7. 4,9	<u>59.</u>	
2	2 Total expenses (must equal Part IX, column (A), line 25)					
3	3 Revenue less expenses. Subtract line 2 from line 1					
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4					
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	4,09	4,4	44.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	b Were the organization's financial statements audited by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	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?					
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	Act and OMB Circular A-133?		. 3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		(2020)	

032012 12-23-20

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

Name of the organization

AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA

Employer identification number

47 - 4484602

Organiz	ation type (check or	ne):			
Filers of	:	Section:			
Form 99	0 or 990-EZ	$oxed{X}$ 501(c)($oldsymbol{4}$) (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	O-PF	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	nly a section 501(c)(7	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
	property) from any	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively except etc., contributions totaling \$5,000 or more during the year			
but it mu	ıst answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).			

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

AMERICAN CIVIL LIBERTIES UNION OF

MINNESOTA

Employer identification number

47-4484602

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$\$,855,871.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

AMERICAN CIVIL LIBERTIES UNION OF

MINNESOTA

Employer identification number

47-4484602

art II Noi	ncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om ort I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) o. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om irt l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
		S	1

Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization **Employer identification number** AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA 47-4484602 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

Transferee's name, address, and ZIP + 4

023454 11-25-20

Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

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

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan	ne of organization AMERICA	N CIVIL LIBERTIE	S UNION OF	Em	oloyer identification number
	MINNESO		504/)		47-4484602
Pa	art I-A Complete if the org	janization is exempt und	er section 501(c) (or is a section 527 o	rganization.
2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures ign activities		>	\$
_		janization is exempt und		•	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	>	\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
	a Was a correction made? o If "Yes," describe in Part IV.				Yes No
		janization is exempt und	er section 501(c).	except section 501(c)(3).
	Enter the amount directly expended	-		-	\$
	Enter the amount of the filing organ				*
	exempt function activities		•	•	\$
3	Total exempt function expenditures				
	line 17b			>	\$
4	Did the filing organization file Form				
5					
	made payments. For each organiza				•
	contributions received that were pro			•	te segregated fund or a
	political action committee (PAC). If	additional space is needed, prov r	vide information in Part I	IV.	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds. If none, enter -0-	
					delivered to a separate
					political organization. If none, enter -0
					ii riorio, oritor o :

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Ochedule O (1 01111 330 01 330 EZ) 2020					1101002 1 agc 2
Part II-A Complete if the org section 501(h)).	janization is exei	mpt under section	n 501(c)(3) and file	d Form 5768 (ele	ection under
expenses, and sha	re of excess lobbying	expenditures).	n Part IV each affiliated	group member's nam	ie, address, EIN,
Limi	its on Lobbying Expe	nd "limited control" pro enditures unts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion ((grassroots Johnving)			
b Total lobbying expenditures to infli		alter (alliera art. La la la calca art.			
c Total lobbying expenditures (add li	-	• • • • •			
d Other exempt purpose expenditure					
e Total exempt purpose expenditure					
f Lobbying nontaxable amount. Enter	er the amount from th	e following table in bot	h columns.		
If the amount on line 1e, column (a) o	or (b) is: The lot	obying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17		00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	, ,				
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				
j If there is an amount other than ze					
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section 5	eraging Period Under 601(h) election do not rate instructions for li	have to complete all o	f the five columns b	elow.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Graseroots labbuing expanditures					

Schedule C (Form 990 or 990-EZ) 2020

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)).

During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, idi it file Form 4720 for this year? Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? at III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and feither (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year Dues, assessments and similar amounts from members C Total Aggregate amount reported in section 6033(e)(f)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2 exceeds the amount on line 3, what portio	1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 and if the Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization 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, answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expe	obbying activity.				o)
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		Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered 'Yes." Dues, assessments and similar amounts from members Dues, assessments and 2, are answered 'answered 'yes. Dues, assessments and 2, are answered 'yes. Dues, assessment	n 501(c)(5), 'No" OR (b) cal	or sec) Part I		
ART IV SUPPLIAMENTAL INTORMATION	art iv Supplemental information	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered 'Yes." Dues, assessments and similar amounts from members Duestection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Durrent	n 501(c)(5), 'No" OR (b) cal	or sec) Part I 2a 2b 2c 3		3, is
art IV Supplemental Information		Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Dues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Surrent year	n 501(c)(5), 'No" OR (b	or sec) Part I		ine
E E E E E E E E E E E E E E E E E E E	2		Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? 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 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? E "Yes," enter the amount of any tax incurred under section 4912 E "Yes," enter the amount of any tax incurred by organization managers under section 4912 E the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? 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 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? The "Yes," enter the amount of any tax incurred under section 4912 The filing organization incurred a section 4912 tax, did it file Form 4720 for this year? The filing organization incurred a section is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Brants 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? Dither activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? The "Yes," enter the amount of any tax incurred under section 4912 The filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Total. Add incurred the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Brants to other organizations for lobbying purposes? Pricect contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Pother activities? Potal. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA

Employer identification number 47-4484602

Par			unds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		1 /	AN Franchisch and address and
		(a) Donor advised funds	-	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	•		
•	are the organization's property, subject to the organization's e			
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	, , ,	•	
Par		enization answered "Vos" on Form		
1	Purpose(s) of conservation easements held by the organization		1990, Part IV,	ille 7.
'	Preservation of land for public use (for example, recreation)		tion of a histo	orically important land area
	Protection of natural habitat	· —		fied historic structure
	Preservation of open space	Fieseiva	lion of a certi	ned filstoric structure
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the	form of a co	nservation easement on the last
2	day of the tax year.	ed conservation contribution in the	ionin or a co	Held at the End of the Tax Year
a	Total number of conservation easements			2a
				2b
	Number of conservation easements on a certified historic structure.			2c
	Number of conservation easements included in (c) acquired af			
	listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, rele			· · ·
	year >	, ,	, ,	· ·
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handli	ng of	
	violations, and enforcement of the conservation easements it h	nolds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing	g conservatio	n easements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing cor	nservation ea	sements during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section	n 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	'		
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial s	tatements that	at describes the
Dor	organization's accounting for conservation easements.	Art Historical Transcures	or Othor C	imilar Assats
Pai	t III Organizations Maintaining Collections of		or Other S	illilar Assets.
	Complete if the organization answered "Yes" on Form 9			
та	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ	,		ice of public
	service, provide in Part XIII the text of the footnote to its finance			alaastadaa af
D	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research i	n turtnerance	e of public service,
	provide the following amounts relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			k 1
2		curse, or other similar assets for fir		
2	If the organization received or held works of art, historical treat the following amounts required to be reported under FASB AS		iai iciai yaii i, į	JOVIGE
9	Revenue included on Form 990, Part VIII, line 1			▶ \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2020

032051 12-01-20

Pai	t III	Organizations Maintaining Co	ollections of Ar	t, Histo	rical Tre	asures, or C	Other S	imilar	Assets	(conti	nued)	
3		g the organization's acquisition, accession								'		
	colle	ction items (check all that apply):										
а		Public exhibition	d	ı 🔲 L	oan or exc	hange program						
b		Scholarly research	е	· 🗌 o	ther							
С		Preservation for future generations										
4	Prov	ide a description of the organization's co	llections and explair	n how the	y further th	e organization's	s exempt	purpos	se in Part	XIII.		
5	Durir	ng the year, did the organization solicit or	receive donations of	of art, hist	orical treas	sures, or other s	imilar as	sets				
		sold to raise funds rather than to be ma								Yes		No
Par	t IV	Escrow and Custodial Arrang		ete if the o	organizatio	n answered "Ye	s" on Fo	rm 990	, Part IV, I	ine 9, or		
		reported an amount on Form 990, Par	t X, line 21.									
1a		e organization an agent, trustee, custodia								_		_
		orm 990, Part X?							L	Yes		No
b	If "Ye	es," explain the arrangement in Part XIII a	and complete the fol	llowing tal	ble:							
										Amoun	t	
С	_	nning balance						1c				
d		tions during the year						1d				
e		ibutions during the year						1e				
f		ng balance						1f		7		٦
		he organization include an amount on Fo					•			Yes	H	∐ No
Par		es," explain the arrangement in Part XIII. Endowment Funds. Complete it										
· u	• •	Zildowillelle i dildo. Complete ii	(a) Current year		ior year	(c) Two years b		Throny	ears back	(a) Four	rvooro	book
10	Pogi	nning of year balance	(a) Current year	(D) PII	ior year	(C) TWO years i.	Jack (u	i iiiiee y	eais Dack	(e) Fou	i years	Dauk
1a b												
0		ributionsnvestment earnings, gains, and losses										
4		ts or scholarships										
e		er expenditures for facilities										
ŭ		programs										
f		inistrative expenses										
g g		of year balance										
2		ide the estimated percentage of the curre	ent vear end balance	e (line 1a.	column (a)) held as:	<u> </u>					
a		d designated or quasi-endowment		%	(u)	,						
b												
С												
	The	percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.									
За		here endowment funds not in the posses	•	ation that	are held ar	nd administered	for the c	rganiza	ition			
	by:	·	•								Yes	No
		Jnrelated organizations								3a(i)		
		Related organizations								3a(ii)		
b		es" on line 3a(ii), are the related organiza								3b		
4	Desc	cribe in Part XIII the intended uses of the		wment fui	nds.							
Par	t VI	Land, Buildings, and Equipm	ent.									
		Complete if the organization answered	d "Yes" on Form 990), Part IV,	line 11a. S	ee Form 990, P	art X, line	e 10.				
		Description of property	(a) Cost or o basis (investr		. ,	or other (other)	(c) Accı depre	umulate ciation	ed	(d) Boo	k valu	е
1a	Land	l										
b		lings										
С		ehold improvements										
d		pment										
е		r										
Total	. Add	lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, column	(B), line 1	0c.)			•			0.

Schedule D (Form 990) 2020

Complete if the organization answered "Yes" on Form 990, F (a) Description of security or category (including name of security) (b) Book (1) Financial derivatives (2) Closely held equity interests		
(1) Financial derivatives	value (c) Method of valuation: Cost or end-of-year market v	
		alue
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" on Form 990, F	art IV, line 11c. See Form 990, Part X, line 13.	
(a) Description of investment (b) Book	value (c) Method of valuation: Cost or end-of-year market v	alue
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, F (a) Description	(b) Book va	lue
(1) DUE FROM AMERICAN CIVIL LIBERTIES		
(2) FOUNDATION	3,253	310
(3) DUE FROM AMERICAN CIVIL LIBERTIES	UNION - NATIONAL 565	130
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)		440
Complete if the organization answered "Yes" on Form 990, F		l
1. (a) Description of liability	(b) Book va	iue
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	>	

Schedule D (Form 990) 2020

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

ORGANIZATION HAS DETERMINED THERE ARE NO AMOUNTS TO RECORD AS ASSETS OR

LIABILITIES RELATED TO UNCERTAIN TAX POSITIONS.

AMERICAN CIVIL LIBERTIES UNION OF

Schedule D (Form 990) 2020	MINNESOTA		47-4484602	Page 5
Schedule D (Form 990) 2020 Part XIII Supplemental Info	ormation (continued)			
	•			

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA

Employer identification number 47-4484602

THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND THE BOARD PRESIDENT AND

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

032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization AMERICAN CIVIL LIBERTIES UNION OF **Employer identification number** 47-4484602 MINNESOTA THEN PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO SUBMISSION TO THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: NEITHER BOARD MEMBERS NOR STAFF MEMBERS SHALL PARTICIPATE IN THE DECISIONS OF ANY MATTER IN WHICH THEY MAY HAVE A CONFLICT OF INTEREST; NOR SHALL THEY PARTICIPATE IN THE DISCUSSION OF SUCH A MATTER UNLESS THE NATURE OF THE CONFLICT HAS BEEN DISCLOSED TO THE OTHER PARTICIPANTS IN THE DISCUSSION. IN THE CASE OF BOARD MEMBERS, THE PROCEDURE SHOULD BE THAT THE MEMBER AFFECTED BY THE CONFLICT OF INTEREST ANNOUNCES THE EXISTENCE OF THE CONFLICT AND THE MINUTES REFLECT THE FACT THAT THE MEMBER DID NOT PARTICIPATE IN THE DECISION OF THE MATTER (NOR IN THE DISCUSSION, IF THAT BE THE CASE). FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEW COMPENSATION FOR THE EXECUTIVE DIRECTOR. COMPENSATION IS DETERMINED BASED ON PERFORMANCE AND CURRENT SALARY. THE ORGANIZATION USES A REPORT COMPILED YEARLY BY THE NATIONAL AMERICAN CIVIL LIBERTIES UNION (ACLU) WHICH LISTS THE SALARIES OF EACH ACLU AFFILIATE BY POSITION. THE ORGANIZATION SPECIFICALLY LOOKS AT ACLU AFFILIATES THAT ARE COMPARABLE IN SIZE AND BUDGET TO AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA. THE ORGANIZATION ALSO LOOKS AT THE MINNESOTA COUNCIL OF NON-PROFITS SALARY GUIDE TO DETERMINE COMPENSATION.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Name of the organization AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA	Employer identification number 47-4484602
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	657.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	657.
PAYROLL PROCESSING FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	5,402.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,402.
"GET OUT THE VOTE" CAMPAIGN CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	72,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	72,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	78,059.

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

(c)

(d)

(e)

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

(a)

Department of the Treasury Internal Revenue Service

AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA

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

Employer identification number 47-4484602

name, address, and EIN (IT applicable) of disregarded entity	Primary activity	foreign country)	or Total Inco	me End-of-yea		ontrolling	9
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, t	pecause it had one	or more related tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
AMERICAN CIVIL LIBERTIES UNION OF MINNESOTA				501(c)(3))	AMERICAN CIVIL	Yes	No
FOUNDATION - 41-6050012, PO BOX 14720,	TO FUND LITIGATION &				LIBERTIES UNION		
MINNEAPOLIS, MN 55414	PUBLIC EDUCATION EFFORTS	MINNESOTA	501(C)(3)	LINE 7	OF MINNESOTA	Х	
	4						

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

Schedule R (Form 990) 2020

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

(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Primary activity	(state or	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	end-of-year	1	tions?	Code V-UBI amount in box 20 of Schedule	General of managin partner?	Percentage ownership
	country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	<u> </u>
1										
1										
1										
	(b) Primary activity	Primary activity Legal domicile (state or foreign			Primary activity Legal domicile (state or foreign foreign Compared to the foreign foreign Compared to the foreign foreign Compared to the foreign for					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	ction b)(13) rolled tity?
		,						Yes	No

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

Yes No

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

1	During the tax year, did the organization engage in any of the following transactions	with one or more re	elated organizations listed in	n Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity										
b Gift, grant, or capital contribution to related organization(s)										
С	Gift, grant, or capital contribution from related organization(s)				1c		Х			
d	Loans or loan guarantees to or for related organization(s)				1d	Х				
	Loans or loan guarantees by related organization(s)				1e		Х			
	•									
f	Dividends from related organization(s)				1f		Х			
g	Sale of assets to related organization(s)				1g		Х			
	Purchase of assets from related organization(s)				1h		Х			
i	Exchange of assets with related organization(s)				1i		Х			
j Lease of facilities, equipment, or other assets to related organization(s)										
k Lease of facilities, equipment, or other assets from related organization(s)										
I Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
					10	Х				
р	Reimbursement paid to related organization(s) for expenses				1p		X			
	Reimbursement paid by related organization(s) for expenses				1q	X				
r	Other transfer of cash or property to related organization(s)				1r		X			
s	Other transfer of cash or property from related organization(s)				1s		X			
2	If the answer to any of the above is "Yes," see the instructions for information on wh	no must complete th	is line, including covered re	elationships and transaction thresholds.						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved					
7	AMERICAN CIVIL LIBERTIES UNION OF									
1) Ì	MINNESOTA FOUNDATION	Q	2,016,185.	COST						
2)										
3)										
4)										
5)										
6)										
3216	3 10-28-20			Schedule	R (Fori	n 990	2020			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	Genera manag partn Yes	(k) Al or Percentage ging ownership
									000) 0000

AMERICAN CIVIL LIBERTIES UNION OF

Schedule R	(Form 990) 2020 MINNESOTA	47-4484602	Page 5
Part VII	(Form 990) 2020 MINNESOTA Supplemental Information		
	Provide additional information for responses to questions on Schedule R. See instructions.		
	Provide additional information for responses to questions on Schedule R. See instructions.		

032165 10-28-20 Schedule R (Form 990) 2020