Office of the Minnesota Secretary of State

Minnesota Public Benefit Corporation / Annual Benefit Report

Minnesota Statutes, Chapter 304A

Read the instructions before completing this form Must be filed by March 31

Filling Fee: \$55 for expedited service in-person, \$35 if submitted by mail



The Annual Benefit Report covers the 12 month period ending on December 31 of the previous year. Notice: Fallure to file this form by March 31 of this year will result in the revocation of the corporation's public bene status without further notice from the Secretary of State, pursuant to Minnesota Statutes, Section 304A.301	
1. Corporate Name: (Required) Minnesota Cuty & Systemic Crostella	1 . 2005
2. The public benefit corporation's board of directors has reviewed and approved this report.	J
3. In the field below, enter the information required by section 304A.301 subd. 2 or 3 for the period covered by this report, (see instructions for further information); Note: Use additional sheets if needed. (Required)	
Sie attached	
4. I, the undersigned, certify that I am the chief executive officer of this public benefit corporation. I further certify that I have sign this document no more than 30 days before the document is delivered to the secretary of state for filing, and that this document is current when signed. I further certify that I have completed all required fields, and that the information in this document is t and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath. Signature of Public Benefit Corporation's Chief Executive Officer Date (Must be dated within 30 days before the report is delivered to the Secretary of State for Filing)	rue
Date (Must be dated within 30 days before the report is delivered to the Secretary of State for Filing) Email Address for Official Notices	
Enter an email address to which the Secretary of State can forward official notices required by law and other notices: Kalling O MN GONSHELL FOR, Cores Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.	
List a name and daytime phone number of a person who can be contacted about this form: **FI-269-1460** **THE CONTRACT (151-269-1460)**	٠.
Contact Name Phone Number	
Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must regist with the MN Dept. of Agriculture's Corporate Farm Program.	er
Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed? Yes No No	



Minnesota Center for Systemic Constellations Minnesota Public Benefit Corporation 2021 Annual Benefit Report

Following are the answers required for a general benefit corporation:

- 3.1i. The board of directors that the Minnesota Center for Systemic Constellations has chosen a third-party standard in the form of an Impact Assessment by B Lab, a non-profit organization that assesses public benefit corporations to assess our performance in 2021.
- ii. Determined that B Lab is indeed an organization independent of any interest in MCSC.
- iii. Approved the Impact Assessment and attachment
- 3.2i. With regard to fiscal 2021, we have chosen B Lab's Impact Assessment tool.
- ii A and B.How the Minnesota Center for Systemic Constellations has contributed to the general benefit, the extent to which and the ways in which the Minnesota Center for Systemic Constellations has created general public benefit are described in the attached B-Lab Impact Assessment questionnaire.
- iiC.The primary circumstances that hindered efforts to pursue or create general public benefit were largely related to the covid pandemic, which caused us to scale back our operations.
- 3.3. This is not the first report we have filed.
- 3.4. We did not use the same version of the B-Lab Impact Assessment
- 3.5. We chose the B-Lab Quick Impact Assessment, rather than the full Impact Assessment because as such a small organization primarily delivering services, not products, much of the longer assessment's questions were not geared toward metrics we could deliver on (manufacturing processes, etc.). And again, the operations we did have were scaled back because of the pandemic's forced change in our market and offerings.
- 3.6 We do not in addition have a specific benefit statement

This assessment is read only

Quick Impact Assessment

QUESTIONS ANSWERED

40

QUESTIONS UNANSWERED

2

Instructions	
Level of Impact Focus	
Describe your company's approach to creating positive impact.	
This is an unweighted question that will not impact your score and is asked only for research/benchmarking purposes.	
Creating positive social or environmental impact is not a focus for our business	
We occasionally think about the social and environmental impact of some aspects of our business, but not frequently.	
We frequently consider our social and environmental impact, but it isn't a high priority in decision-making.	
 We consistently incorporate social and environmental impact into decision-making because we consider it important to and profitability of our business. We treat our social and environmental impact as a primary measure of success for our business and prioritize it even in it may not drive profitability. 	
Workers	
Compensation Policies and Practices	
Does your company offer any of the following additional financial benefits to non-executive wor	rkers?
Your answers determine which future questions in the assessment are applicable to your company.	
Cost of living adjustments that match inflation rates of the country	
Bonuses or profit-sharing	
Employee ownership opportunities	
None of the above	

MinStriveying Sandi Berichimal King Engagements and Attrition ent.net/company/161640/assessment/1390... Does your company monitor and evaluate your worker satisfaction and engagement in any of the following ways? Your answers determine which future questions in the assessment are applicable to your company. We calculate employee attrition rate We benchmark employee attrition rate to relevant benchmarks We regularly (at least once a year) conduct employee satisfaction or engagement surveys We benchmark employee satisfaction to relevant industry benchmarks We disaggregate calculations based on different demographic groups to identify trends We outperform industry benchmarks on attrition We outperform industry benchmarks on satisfaction None of the above Majority Hourly vs. Salaried Workers Are the majority (greater than 50%) of your employees paid on a fixed salary or a daily or hourly wage? This is a REQUIRED question that determines the set of additional questions your company will respond to regarding your employee impact. O Fixed Salary Daily or hourly wage **Employee Benefits** Does your company provide any of the following benefits to your employees? In addition to voluntary benefits provided by the company, include any offerings that are required or provided by government programs.

☐ At or above market compensation packages, as compared to Industry averages/benchmarks
 ☐ Annual Cost of Living Adjustments
 ☐ Bonuses or Profit Sharing

Bonuses or Profit Sharing

Retirement Plan

☐ Health insurance coverage

Stock Options or Ownership in the Company

Other

None of the above

○ ○ <a< th=""><th>a living wage for an individual?</th><th>least the edu</th><th>iivaieni Oi</th></a<>	a living wage for an individual?	least the edu	iivaieni Oi
O 75-99% ○ 90-99% ○ 100% ⑤ N/A High to Low Pay Ratio What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? ○ >20x ○ 16-20x ○ 11-15x ○ 6-10x ⑥ 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. □ Coinsurance of 80%+ covered by healthcare plan □ Company payment of 80%+ of individual premium □ Company payment of 80%+ of family coverage premium □ Cut-of-pocket maximum for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) □ Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) □ Co-payment of \$20 or less per primary care visit paid for by worker □ Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	Please exclude students and interns in this calculation,		
O 90-99% O 100% ● N/A High to Low Pay Ratio What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? ○ >20x ○ 16-20x ○ 11-15x ○ 6-10x ○ 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. □ Coinsurance of 80%+ covered by healthcare plan □ Company payment of 80%+ of individual premium □ Company payment of 80%+ of family coverage premium □ Out-of-pocket maximum for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) □ Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) □ Co-payment of \$20 or less per primary care visit paid for by worker □ Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$60 or less for non-formulary drugs	O<75%		•
O 100% O N/A High to Low Pay Ratio What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? ○ >20x ○ 16-20x ○ 11-15x ○ 6-10x ○ 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. □ Coinsurance of 80%+ covered by healthcare plan □ Company payment of 80%+ of individual premium □ Company payment of 80%+ of individual premium □ Company payment of 80%+ of family coverage premium □ Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) □ Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) □ Co-payment of \$20 or less per primary care visit paid for by worker □ Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	75-89%		•
High to Low Pay Ratio What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? > 20x 16-20x 11-15x 6-10x 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. Consurance of 80%+ covered by healthcare plan Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit pald for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	O 90-99%		
What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? >20x	O 100%		
What multiple is the highest compensated individual paid, inclusive of bonus, as compared to the lowest paid full-time worker? >20x	⊙ N/A		
paid full-time worker? >20x 16-20x 11-15x 6-10x 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. Coinsurance of 80%+ covered by healthcare plan Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	High to Low Pay Ratio		
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11-15x 6-10x 1-5x Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. Coinsurance of 80%+ covered by healthcare plan Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Company payment of 80%+ of family coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	O>20x		
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Healthcare Plan Your company's healthcare plan available to all full-time workers includes: Select all that apply. Coinsurance of 80%+ covered by healthcare plan Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	O11-15x		
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Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	Select all that apply.		
Company payment of 80%+ of individual premium Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	Coinsurance of 80%+ covered by healthcare plan		
Company payment of 80%+ of family coverage premium Out-of-pocket maximum for individual coverage of \$2000 or less (net of company HSA or equivalent contribution) Annual deductible for individual coverage of \$1000 or less (net of company HSA or equivalent contribution) Co-payment of \$20 or less per primary care visit paid for by worker Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs			
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Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand name drugs, and \$50 or less for non-formulary drugs	_		
non-formulary drugs	Co-payment of \$20 or less per primary care visit paid for by worker		
	Prescription drug coverage wherein workers pay \$10 or less for generic drugs, \$30 or less for brand n	ame drugs, and	\$50 or less for
☐ Explicit coverage of transgender-inclusive healthcare	non-formulary drugs		
	Explicit coverage of transgender-inclusive healthcare		
None of the above	None of the above		

Minio for the form of the company of

What additional beliefits are offered to as full-time tendied workers:	
Dental insurance	
Short-term disability	
Long-term disability	
Structured account mechanism for qualified medical expenses (e.g. HSA, HRA, FSA)	•
Domestic partner or civil union spousal benefits	· · · · · · · · · · · · · · · · · · ·
Life insurance	
☐ No additional benefits	•
Other - please describe	
Employee Handbook Information	
What is included in your company's written and accessible employee handbook?	
☐ A non-discrimination statement	
An anti-harassment policy with reporting mechanisms, processes, and disciplinary procedures	
A statement on work hours	
Policies on pay and performance issues	
Policies on benefits, training and leave	
Grievance resolution process	
Disciplinary procedures and possible sanctions	
A neutrality statement regarding workers' right to bargain collectively and freedom of association	
Prohibition of child labor and forced or compulsory labor	
We have no written employee handbook	
Number of Paid Days Off	
What is the annual minimum number of paid days off (including holidays) for full-tir	ne employees?
O 0-8 work days	
O 9-15 work days	
⊙ 16-20 work days	
O 21-25 work days	
O 25+ work days	•

Min Pard Primary Garagivers Edave for Hourly Workers pactassessment.net/company/161640/assessment/1390... What primary parental leave policies apply to your hourly workers, either through your company or a government program? If applicable, please select one answer indicating total time off (answers 1-3), and one answer indicating fully paid time off (answers 4-7). Primary caregivers receive 4-12 weeks of time off for parental leave (including unpaid and paid leave) Primary caregivers receive 12 weeks to 6 months of time off for parental leave (including unpaid and paid leave) Primary caregivers receive 6 months or more of time off for parental leave (including unpaid and paid leave) 3-6 weeks of primary parental leave (or equivalent) is fully paid 6-12 weeks of primary parental leave (or equivalent) is fully paid 12-18 weeks of primary parental leave (or equivalent) is fully paid ☐ 18+ weeks of primary parental leave (or equivalent) is fully paid Primary caregivers receive less than 4 weeks off or no time off for parental leave Professional Development Does your company provide any of the following opportunities for professional development for your employees? Company has formal onboarding process for new employees Company provided ongoing training to employees in the last year Company has a policy to encourage internal promotions and hiring for advanced positions (posting job openings internally first, etc.) Company provides cross-skills training for career advancements or transitions (i.e. management training for non-managers) Company provides non-career specific life-skill training to improve the personal development of employees (financial literacy, ESL. Company facilitates or has an allocated budget for external professional development opportunities, including conference attendance, online trainings, etc. None of the above Employee Review Process Which of the following is included or applies to your company's formal process for providing performance feedback to employees? Check all that apply. Process has a regular schedule and is conducted at least annually Peer and subordinate input Written guidance for career development Social and environmental goals Clearly-identified and achievable goals A 360-degree feedback process

All tenured employees receive feedback

None of the above

MinWorker	Photode	Market Dr	130 CBB	}-03-19)

https://app.bimpactassessment.net/company/161640/assessment/1390...

Do you conduct any of the following worker engagement practices to promote worker voice a satisfaction?	nd
Company conducts an employee satisfaction or engagement survey at least annually	
Company has complaint mechanisms to allow employees to raise Issues or concerns without fear of reprisal	
Company formally solicits non-executive employee input or empowers employees in strategy setting	
Company employees have union representation	
☐ Other	
None of the above	
Community	· ·
Measurement of Diversity	
What attributes of a diverse workforce does your company track, either through anonymous so other methods legal in your jurisdiction?	urveys or
If collecting this type of demographic data is not legal in your jurisdiction, select None of the Above.	
Socioeconomic status (as determined by low income residence, education level, etc.)	
Race or ethnicity	•
Gender	•
Age	
Other - please describe	
None of the above	
Social or Environmental Screening of Suppliers	
Does your company screen or evaluate Significant Suppliers for social and environmental imp	act?
This question determines the set of supplier-focused questions your company will respond to.	•
○ Yes	
⊙ No	
Job Growth Rate	•
What was your company's net job growth rate for full-time and part-time positions over the las months? ONLY include newly created jobs that are paid a living wage.	it 12
If there is no living wage data available for your country of operations, include new jobs that pay 10% or more above a minim	um wage.
● 0% (no growth on a net basis)	
O 1-24%	
○ 25-49%	
○50%+	

Min**Spending on Local Suppliers** 2019-03-19)

https://app.bimpactassessment.net/company/161640/assessment/1390...

What percentage of your company's expenses (excluding labor) was spent with independent suppliers local to the company's headquarters or relevant facilities in the last fiscal year?

Please click "Learn More" to understand how to answer this question.	
○<20%	
O 20-39%	
● 40-59%	
○ 60%+	
○ Don't know	
Impactful Banking Services	
What characteristics apply to the financial institution that provides the majority banking services?	y of your company's
Certified CDFI or national equivalent social investment organization Certified 8 Corporation	
	• •
Member of the Global Alliance for Banking on Values	
Cooperative bank or credit union	
Local bank committed to serving the community Independently owned bank	
☐ None of the above	
Inclusive Workplaces	
Does your company do any of the following practices to promote a diverse an and/or work environment?	d inclusive workforce
Company has a policy in place to identify and/or give preference to suppliers that are owned by	Inderrepresented groups
Company provides diversity and inclusion training to employees (i.e. implicit bias exercises, etc.)	
Company has hiring practices that are designed to reach underrepresented groups	
Company has a formal program or committee tasked with issues regarding diversity and inclusion	· ·
Company facilitates employee resource groups for employees	٠.
None of the above	

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https://app.bimpactassessment.net/company/161640/assessment/1390...

How does your company take part in civic engagement? Your answers determine which future questions in the assessment are applicable to your company. Financial or in-kind donations (excluding political causes) Community investments Community or pro-bono service Advocacy for adopting improved social or environmental policies or performance Partnerships with charitable organizations or membership with community organizations Discounted products or services to qualified underserved groups Free use of company facilities to host community events Equity or ownership in the company granted to a nonprofit Other - please describe ☐ None of the above Management from Underrepresented Populations How many of your company managers identify as from another underrepresented social group? If collecting this type of demographic data is not legal in your jurisdiction, select Don't Know. ● 0% O 1-9% 010-19% 020-29% 030%+O Don't know Female Management How many of your company managers identify as women? © 0% O 1-9% O 10-24% O 25-39% O 40-49% O 50%+ O Don't know

O N/A

Environment

What kind of facilities does your business primarily operate in? Your answers determine which future questions in the assessment are applicable to your company. O Company-owned office space C Leased office space O Co-working Space Virtual or home offices **Environmentally Friendly Office Practices** Does your company have any of the following environmentally friendly practices in the facilities where you operate? Company formally encourages behaviors in facilities to reduce environmental impact (reminders to turn lights off, paper/printing reuse, non-disposable silver/cup/dining ware Company has programs in place to recycle standard recyclable materials Company has a program in place to recycle waste beyond standard materials (including composting of food waste, etc) Company has worked with landlord to promote more environmentally sustainable conditions (recycling programs, energy efficiency, Company is located in a building with a comprehensive green building certification None of the above Monitoring and Managing Water Use Does your company monitor and manage your water usage? Your answers determine which future questions in the assessment are applicable to your company. We do not currently monitor and record water usage We regularly monitor and record water usage but have not set any reduction targets We monitor and record water usage and have set specific reduction targets relative to previous performance (e.g. a 5% reduction of water usage from baseline year) We regularly monitor and record emissions and have set science-based targets necessary to achieve sustainable usage linked to our local watershed We have met specific reduction targets set during this reporting period **Monitoring Energy Usage** Does your company monitor, record, or report its energy usage? Include electricity and other energy consumption from heating, hot water, etc. Your answers determine which future questions in the assessment are applicable to your company. We do not currently monitor and record usage We monitor and record usage but have set no reduction targets We monitor usage and have set intensity targets (e.g. relative to dollars of revenue, volume produced, etc.) that are being monitored We monitor usage and have set absolute reduction targets regardless of company growth

We have met specific reduction targets during the reporting period

MinLeow Impact Renewable Effergy Use

We have met the specific reduction targets set during this reporting period

We have achieved carbon neutrality

https://app.bimpactassessment.net/company/161640/assessment/1390...

What percentage of energy use is produced from low-impact renewable sources? Include electricity and other energy consumption from heating, hot water, etc. Please include both purchased and onsite-generated renewable energy. O0%1-24% O 25-49% O 50-74% O 75-99% O 100% O Don't know **Environmental Design Practices** Has your company integrated environmental considerations in the design of products or services in any of the following ways? Company has conducted life cycle assessments on products/ services Company has had the environmental impact of product or service certified by a third party Company has recycling or reclamation programs to support the proper disposal or re-use of products Company has conducted source reduction exercises to reduce total volumes used in the product/service or its packaging Company labels all materials in product for effective recycling Company designs products to facilitate disassembly and repair to extend useful life of and disposal of component parts Other None of the above Monitoring Greenhouse Gas Emissions How does your company manage its greenhouse gas emissions for at least Scope 1 and 2? Your answers determine which future questions in the essessment are applicable to your company. We do not currently monitor and record emissions We regularly monitor and record emissions but have not set any reduction targets We regularly monitor and record emissions and have set specific reduction targets relative to previous performance (e.g. a 5% reduction of GHGs from baseline year) We regularly monitor and record emissions and have set specific science-based targets necessary to achieve global goals to address climate change

Min Nonitoring and Reporting Non Mazardous Wastenpactassessment.net/company/161640/assessment/1390... How does your company monitor and manage your waste production? Your answers determine which future questions in the assessment are applicable to your company. We do not currently monitor and record waste production We regularly monitor and record waste production but have not set any reduction targets We regularly monitor and record waste production and have set specific reduction targets relative to previous performance (e.g. a 5% reduction of waste to landfill from baseline year) We regularly monitor and record waste produced and have set a zero waste target We have met the specific reduction targets set during this reporting period We produce zero waste to landfill / ocean Governance Governance Structures What is the company's highest level of corporate oversight? Owner or Manager Governed (including Board of Directors with only owners/ executives) O Management, Executive Committee, or Democratic Governance O Non-Fiduciary Advisory Board O Board of Directors (with at least one member who is not an executive or owner of the company) Internal Accountability Does your company do any of the following to promote good governance and accountability? Company holds regular (at least monthly) management or staff meetings Company shares financial performance with employees Company has internal financial controls to limit access to billing/payments, etc. Company has a code of ethics/ anti-corruption policy Company has a whistleblowing policy A portion of executive compensation (bonuses) is tied to social and/or environmental performance None of the above External Accountability Does your company do any of the following to provide external accountability and transparency? Company has an advisory committee to provide advice and guldance Company has their financials reviewed and/or audited by a third party Company has a formal board of directors

Company publicly shares data about its impact on workers, community, and/or the environment

None of the above

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https://app.bimpactassessment.net/company/161640/assessment/1390...

Does your company's formal, written corporate mission statement include any of the following? A formal written corporate mission statement is one that is either publicly facing or formally shared with the employees of the company, Please check all that apply. ☐ No social or environmental commitment A general commitment to social or environmental responsibility (e.g. to conserve the environment) A commitment to a specific positive social impact (e.g. poverty alleviation, sustainable economic development) A commitment to a specific positive environmental impact (e.g. reducing waste sent to landfills through upcycled products) A commitment to serve a target beneficiary group in need (e.g. low-income customers, smallholder farmers) We have no written mission statement Impact Business Models Mission Lock Separate from a mission statement, what has your company done to legally ensure that its social or environmental performance is a part of its decision-making over time, regardless of company ownership? This question is related to the legal requirement for Certified B Corps. Click "Learn" for more information and resources about this requirement. O Signed a contract or Board resolution committing to adopting a legal form that requires consideration of all stakeholders (e.g. signed B Corp Agreement) O Adopted a specific legal entity or governance structure that preserves mission over time, but does not require consideration of all stakeholders in its decision-making (e.g. cooperative) O As a company wholly owned by another company that has not done so, amended corporate governing documents or adopted a legal entity that requires consideration of all stakeholders in its decision-making (e.g. benefit corporation, completed B Corp legal amendment) As an independent or publicly-owned business, amended corporate governing documents or adopted a legal entity that requires

consideration of all stakeholders in its decision-making (e.g. benefit corporation, completed 8 Corp legal amendment)

O None of the above

Min Socially Beneficiat Products and Services Lips://app.bi	impactassessment.net/company/16	1640/assessment/1390
Are any of your products or services designed to materially improcustomers or their communities in any of the following ways?	rove the livelihood or welln	ess of your
Providing access to basic human needs for individuals who do not have access neighborhoods)	ss (affordable housing, electricity for	r off grid
Providing or promoting health or health care (vaccinations, medical software)		
Increasing knowledge through education or supporting educational initiatives (e	educational games, books)	
Providing economic opportunities for the economically disadvantaged (staffing		
Preserving or promoting culture and/or arts and media		
Improving the social or environmental impact of organizations		
Supporting the success of impactful businesses or organizations		
Other		
☐ None of the above	•	
Environmentally Beneficial Products and Service	es	
Are any of your products or services designed to preserve or rest following ways?	tore the environment in an	y of the
Our product or service provides or is self-powered by renewable or cleaner burn lanterns)	rning energy (e.g. wind turbines, so	lar powered
Our product or service is designed to conserve resources, including water, ener efficient appliances, water conservation technology)	rgy, or material (e.g. recycled produ	ucts, energy
Our product is designed to conserve or preserve land or wildlife (e.g. FSC Certif	fied paper / wood products)	
Our product or service reduces and uses less toxic or hazardous materials (e.g.		
Our product or service provides environmental education or information	,,	•
Our production practices are designed to conserve the environment across the None of the above	company's entire operations	
Focus on Beneficial Products and Services		
How deep is your company's focus on these impactful products? revenues in the last fiscal year came from products/services designed selected?		
1-24%		
☐ 25-49%		
☐ 50-74%		
		•
75-99% 872 10004		•
2 100%		
Not applicable		

MinBeneficial Products and Services Design and Measurement Comp	pany/161640/assessment/1390
Which of the following is true of your products and services designed to have the poenvironment impact you just identified?	esitive social or
We have designed the product to be used by, or specifically benefit, customers that are low income and/or. We have third party certifications or approvals that verify the positive impact of our product (e.g. Organic € We track the positive results of our impactful product through case studies, surveys, or in depth outcomes ☐ We measure and/or manage the potential negative or unintended impacts of our product / service ☐ None of the above	Certified Products)
Community or Worker Focused Impact Business Models	
Does your company have any of the following community or worker focused impact	business models?
Our company Intentionally hires and trains people with chronic barriers to employment Our company is owned by our employees and all employees have the opportunity to become owners	
Our company seeks out underserved or low income suppliers AND provides above market prices and/or a effort to help alleviate poverty (i.e. fair trade)	additional support, in an
Our business model is designed to formally, directly, and regularly donate a material portion of the comparevenue, >5% of time, >20% of profits/ownership) to charitable causes	ny's assets (>2% of
Our business model is designed to support and/or rebuild our local community	
Our company is a producer cooperative designed to improve income generating opportunities for supplier Other	rs
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Steve Simon Secretary of State

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