Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

Α	For the	e 2018 cal	lendar year, or tax year beginning	/	, and	ending		Latin 75		
В	Check if	applicable:	C Name of organization NORTHE	ERN WATERS LAND TRUST			D Employ	er identification	number	
	Address	change	Doing business as							
∇	Name ch	2020	Number and street (or P.O. box if mail	is not delivered to street address)	Room/suite		41-18879	06		
Δ	Name cn	lange	P O BOX 124				E Telepho	ne number		
	Initial retu	urn	City or town	State	ZIP code					
	Class as hose	n/terminated	WALKER	MN	56484-012	24	-			
	rmai returi	nterminated	Foreign country name Fo	preign province/state/county	Foreign posta	al code				
	Amended	d return					G Gross re	eceipts \$		507,087
П	Application	on pending	F Name and address of principal officer:			H(a) le thi	is a group retur	n for subordinates) Type	X No
	Application	on pending			0.4	10.75				
			TIM BREMICKER P O BOX 124			The state of the s		ates included?	Yes	No No
1 7	Tax-exem	pt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "	No," attach a	list. (see instruc	tions)	
JI	Website	e: Nwv	w.leechlakewatershed.org			H(c) Gro	oup exemptio	n number 🕨		
		rganization:		ssociation Other	1 Ye	ear of forma	tion: 199:	M State o	f legal domicile	e: MN
	art I			occordation out or P	1-1	ar or rorma	199) III Oldio 0	nogai dominali	- IVIIA
U			mmary	n or most significant activiti	oc: TO	ELINID E	POMOTE	AND ENAB	I E ACTIVI	TIES TH
ø	1		escribe the organization's missio							HES IT
DC			ROTECT THE NATURAL ENVIRO	JINMENT OF THE AREA FO	JK THE USE	ANDE	NJOYMEN	II OF CURR	ENT AND	
& Governance			E GENERATIONS							الترفيد بتراجيد
> N	2	Check th	his box 🕨 if the organization	discontinued its operation	s or disposed	d of more	than 25%	of its net as	sets.	
ŏ	3	Number	of voting members of the govern	ing body (Part VI, line 1a).				3		13
ŏ	4		of independent voting members					4		13
ies	5		mber of individuals employed in o	이 그 그리는 이번 구를 보는 어느로 그리면 주었다고 있다. 취임하는 그림이				5		7
Σ	6		mber of volunteers (estimate if ne					6		
Activities	7a		related business revenue from Pa					7a		0
	b		elated business taxable income fr					7b		0
_	D	Net unite	nated business taxable income in	om Form 990-1, line 38			Prior Year	170	Current Ye	
		Contribu	tions and create (Dort VIII, line 4	h)		4		24.200		
ne	8		itions and grants (Part VIII, line 1			-	2	04,309		498,768
Revenue	9		service revenue (Part VIII, line 2			-		4,870		7,906
è	10		ent income (Part VIII, column (A)					1,363		413
_	11		venue (Part VIII, column (A), line				0			0
	12		enue—add lines 8 through 11 (mus				2	10,542		507,087
	13	Grants a	and similar amounts paid (Part IX	, column (A), lines 1-3)				0		17,500
	14	Benefits	paid to or for members (Part IX,	column (A), line 4)				0		0
S	15	Salaries,	other compensation, employee ber	nefits (Part IX, column (A), line	es 5-10)		1:	24,793		102,971
nse	16a	Profession	onal fundraising fees (Part IX, co	lumn (A), line 11e)				0		0
Expenses	b		draising expenses (Part IX, colu		44 707	7				
Ä	17		penses (Part IX, column (A), line				4	61,688		440,273
	18		penses. Add lines 13–17 (must e					36,481		560,744
	19		e less expenses. Subtract line 18					75,939		-53,657
7 8	15	HOVOIIGO	71033 experises. Gubiract line 10	nontinio 12		Beginn	ing of Curre		End of Yea	
ance	20	Total acc	sets (Part X, line 16)			Degiiiii		31,203		719,641
Asse	24							13,467		5,562
Net Assets or Fund Balances	21		oilities (Part X, line 26)							
			ets or fund balances. Subtract line	e 21 Hom line 20		1		67,736		714,079
	ırt II		nature Block , I declare that I have examined this return	! . b . l'				Carrie dala		
			ct, and complete. Declaration of preparer (
unu	DONOI, ICI	S dido, correc	st, and complete. Becaration of property	outer blair emeery to baced off all th	office of the	or properor	Tido di iy iliio	mougo.		
Sig	ın		Ci				Data			
He	re	1 .	Signature of officer				Date			
_			Type or print name and title	I No. 1 Company of the Company of th		In	. 1		Local	
		Print	Type preparer's name	Preparer's signature		Date	9	Check if	PTIN	
Pai		Ron	ald A Peterson	Ronald A Peterson		7/0	9/2019	self-employed	P000257	54
	parer	The same				1		The state of the state of the	(-//	-
Us	e Only	/	's name Pederson, Smith, Ro	and the second s				41-179663		
_			's address ► PO Box 1120, Walker				Phone no.	218-547-3		
May	the IR	RS discuss	s this return with the preparer sho	own above? (see instruction	ns)				X Yes	No

Form	990 (2018)	NORTHERN WATERS LAND TRUST	41-1887906	Page 2
	irt III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III.		
1	TO FUN	escribe the organization's mission: ID, PROMOTE AND ENABLE ACTIVITIES THAT WILL PROTECT THE NATURAL ENVIR OR THE USE AND ENJOYMENT OF CURRENT AND FUTURE GENERATIONS	CONMENT OF THE	
2	the prior	organization undertake any significant program services during the year which were not list. Form 990 or 990-EZ?		X No
3	Did the o	organization cease conducting, or make significant changes in how it conducts, any progra ?		X No
4	Describe expense	describe these changes on Schedule O. the organization's program service accomplishments for each of its three largest programs. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grames expenses, and revenue, if any, for each program service reported.		ć.
4a	TO FUN) (Expenses \$ 529,874 including grants of \$ D, PROMOTE AND ENABLE ACTIVITIES THAT WILL PROTECT THE NATURAL ENVIR E AND ENJOYMENT OF CURRENT AND FUTURE GENERATIONS		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$ including grants of \$)
4d	Other pro	ogram services. (Describe in Schedule O.)		

0 including grants of \$

529,874

(Expenses \$

Total program service expenses

4e

0)(Revenue \$

0)

Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X 2 X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X 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 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 X 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 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 X 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 10 X 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete X 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 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 11d X X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. . . 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X. 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E........ 13 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X 19 20a X **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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

Form **990** (2018)

Par	t IV Checklist of Required Schedules (continued)		1000	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	+4		1.77
	employees? If "Yes," complete Schedule J	23		X
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			ton .
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	0.4		\ v
- 24	to defease any tax-exempt bonds?	24c 24d		X
d 253	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		^
234	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	200	-	1
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	1111		12
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			11-
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00		7
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b	-	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		^
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
199	conservation contributions? If "Yes," complete Schedule M	30		X
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?			7
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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,	125		
722	III, or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	330		
36	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	X
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		- 1	1
38	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
Par		1 23	-	
	Check if Schedule O contains a response or note to any line in this Part V	لرائي		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	2		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X	

Form	990 (2018) NORTHERN WATERS LAND TRUST 41-188	7906	Р	age 5				
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
4	Land the Author Control of the Section 200 and	1	Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 7							
b	Statements, filed for the calendar year ending with or within the year covered by this return	2b	Х					
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	20						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,							
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
b	If "Yes," enter the name of the foreign country:							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		4				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	13.4		182				
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	-						
-	gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.0						
Ÿ	required to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		7.				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	\blacksquare		1				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders							
a b	Gross income from members or shareholders	1						
D	against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.0						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
a	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 organization is licensed to issue qualified health plans							
C	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year	15		X				
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							

Part VI

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

	tion A. Governing Body and Management			Yes	No
1a		1a 13		Ei	
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation				
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	er person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w	as filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's	assets?	5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members				
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertake				
	the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O .		9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the		1	1	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt po		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	oro ming are retriev	.,.		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>		120		
	describe in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approximately approximately approximately and approximately approximate		177		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
a	The organization's CEO, Executive Director, or top management official.		15a	Х	
b	Other officers or key employees of the organization		15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements.	romant			
Iva	그게 없다. 하나 이 아니라 하는데 아니라		160		~
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation in injurity party or procedure requiring the organization to evaluate and the organization of the				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe		404		V
	the organization's exempt status with respect to such arrangements?		16b		X
5ect 17	ion C. Disclosure List the states with which a copy of this Form 990 is required to be filed MN				
	요한다. [20] 이 마이마 그리아 아마 (10) (10) (10) 이 아마 (10) (10) (10) (10) (10) (10) (10) (10)	and 000 T/Costina 6	01/01		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990		01(C)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap				
10		xplain in Schedule O)	014	d	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, financial attempts available to the public during the tay year.	conflict of interest poli	cy, an	u	
20	financial statements available to the public during the tax year.	nooke and records.			
20	State the name, address, and telephone number of the person who possesses the organization's		-		
	MARLENE WALLER P.O. BOX 124, WALKED, MN 56484 0124	218-547-4510			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted 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
(1) TIM BREMICKER	5.00			H						
CHAIR	0.00	X		X			+	0	0	
(2) DAVID MILLER	5.00									
SECRETARY	0.00	X		X		p	de a	0	0	
(3) NATE LUNDEEN	5.00									
TREASURER	0.00	X		X				0	0	
(4) MARY ACKERMAN	5.00	17.4			10.00			· · · · · · · · · · · · · · · · · · ·		
VICE CHAIR	0.00	Х		X				0	0	
(5) RANDY FERRIN	1.00									
DIRECTOR	0.00	X						0	0	
(6) RAY GILDOW	1.00									
DIRECTOR	0.00	X						0	0	
(7) BOB KARLS	1.00	1777								
DIRECTOR	0.00	X		(2)		12.21	1	0	0	
(8) JIM MILLER	1.00		-	T		7.7				
DIRECTOR	0.00	X						0	0	
(9) MAGGIE MCGILL	1.00					===	=			
DIRECTOR	0.00	X						0	0	
(10) NANCY MEIER	1.00									
DIRECTOR	0.00	X						0	0	
(11) JOHN PERSELL	1.00									
DIRECTOR	0.00	X					-	0	0	
(12) TERRY TRIPP	1.00			T						
DIRECTOR	0.00	X	1.1			17.7	.1.	0	0	
(13) BOB FRINK	1.00	10								
DIRECTOR	0.00	X						0	0	
(14)		7			7-7	1	1	1		

(15) (16) (17) (18) (19) (20) (21) (22)		week (list any hours for related organizations below dotted 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
(16) (17) (18) (19) (20) (21) (22)										-	
(17) (18) (19) (20) (21) (22)									3		
(18) (19) (20) (21) (22)				-							
(19) (20) (21) (22)											
(20) (21) (22)										7	
(21)											
(22)											
(22)								4			
				H	H				4		
					Щ						
(23)	***************************************										
(24)										. 4	
(25)											
	Sub-total								0	0	0
d T	otal (add lines 1b and 1c).							•	0	0	0
	otal number of individuals (including but not ling eportable compensation from the organization		ted a	bov	-	vho	recei	ved	more than \$100	,000 of	
	old the organization list any former officer, direct								The second secon		Yes No
th	or any individual listed on line 1a, is the sum one organization and related organizations greated organizations.	ter than \$150,00	00? //	"Ye	s,"	com	plete	Sci	hedule J for such		4 X
5 D	old any person listed on line 1a receive or accruor services rendered to the organization? If "Ye	ue compensatio	n fror	n ar	ıy u	nrel	ated	orga	anization or indiv	ridual	5 X
	n B. Independent Contractors	s, complete so	neau	ne J	101	Suc	n per	3011			3 ^
1 C	complete this table for your five highest comper compensation from the organization. Report corear.										ax
	(A) Name and business addre	ess							(B) Description of serv	vices C	(C) compensation
											0
			_		-	_					0
											0
2 To	otal number of independent contractors (includ		- 20-2								0

Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to any line in	this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
र र	1a	Federated campaigns				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues				
S, G	С	Fundraising events		1		
Sifts lar/	d	Related organizations ,				
ns, (е	Government grants (contributions) 1e 403,446				
ution er S	f	All other contributions, gifts, grants, and				
rib Oth		similar amounts not included above 1f 95,322				T-05 = 000
ont	g	Noncash contributions included in lines 1a–1f: \$ 0				
Oa	h	Total. Add lines 1a–1f	498,768			
e Te		Business Code		-7-37%		
enc	2a		0			
Program Service Revenue	b		0			
Se	С	200000000000000000000000000000000000000	0			
erv	d	XCCC 424 C44 C44 C44 C44 C44 C44 C44 C44	0			
E	е		0			
gra	f	All other program service revenue	7,906			
Pro	g	Total. Add lines 2a–2f	7,906			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	413			413
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
	-	(i) Real (ii) Personal				
	6a	Gross rents				
	b	Less: rental expenses				
	c	Rental income or (loss) 0 0				
	d	Net rental income or (loss)	0			
	7a	Gross amount from sales of (i) Securities (ii) Other				
	1 a	assets other than inventory 0 0				
	h	Less: cost or other basis		- F		
	b	and sales expenses 0 0		10.00		
	_			g (4)		
	C	San S. (1886)		o comment	-94	21,
	d	Net gain or (loss)	0		-	
Other Revenue	8a	Gross income from fundraising events (not including \$ 0				
Rev		of contributions reported on line 1c). See Part IV, line 18				
he	b	Less: direct expenses b				
ŏ	C	Net income or (loss) from fundraising events	0			
	9a	Gross income from gaming activities.	-	1000		
	Ja	See Part IV, line 19				
	h	Less: direct expenses b				
	b		0			
	C	Net income or (loss) from gaming activities	0		-	
	10a	Gross sales of inventory, less				
		returns and allowances a 0				
	b	Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory	0			
	202	Miscellaneous Revenue Business Code				
	11a		0			
	b		0			
	С		0			
	d	All other revenue	0			
	е	Total. Add lines 11a–11d	0			
	12	Total revenue. See instructions.	507 087	0	0	413

Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 7b, 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				
	domestic governments. See Part IV, line 21	17,500	17,500		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	-			
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	0			
•	trustees, and key employees	0		0	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	0			
7	persons described in section 4958(c)(3)(B)	95,053	80,795	9,505	4,753
8	Pension plan accruals and contributions (include	95,055	00,795	9,505	4,755
0	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	7,918	6,730	792	396
11	Fees for services (non-employees):	7,510	0,750	102	330
a	Management	0			
b	Legal	0			
c	Accounting	6,943	5,554	1,389	
d	Lobbying	0		1,000	
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	45,828	45,828	0	
12	Advertising and promotion	1,857	1,671		186
13	Office expenses	10,883	9,251	1,088	544
14	Information technology	0			
15	Royalties	0			
16	Occupancy	22,109	17,687	4,422	
17	Travel	2,841	2,841		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	241	157	84	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,278	1,278	0	0
23	Insurance	2,911	2,038	873	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	204 200	221 222		
a	Land Aquisition / Real Estate Tax	331,008	331,008		
b	Dues & Subscriptions	6,242	6,242	000	200
C	Postage	798	320	239	239
d	Telephone	1,947	974	681	292
e	All other expenses Events	5,387	E20 074	10.070	5,387
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	560,744	529,874	19,073	11,797
20			1		
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
	10.10.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1				

Part X

		Check if Schedule O contains a response or	note to any line in this Part X		400	
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		0	1	
	2	Savings and temporary cash investments		443,438	2	366,719
	3	Pledges and grants receivable, net	0	3	0	
	4	Accounts receivable, net		12,893	4	29,328
	5	Loans and other receivables from current and f				
		trustees, key employees, and highest compens				
		Complete Part II of Schedule L		0	5	
	6	Loans and other receivables from other disqualified pers				
	- 1	4958(f)(1)), persons described in section 4958(c)(3)(B), a				
1		sponsoring organizations of section 501(c)(9) voluntary e				
Assets		organizations (see instructions). Complete Part II of Sche		0	6	
SS	7	Notes and loans receivable, net	0	7	0	
A	8	Inventories for sale or use		0	8	
	9	Prepaid expenses and deferred charges	production and a second	0	9	
	10a	Land, buildings, and equipment: cost or				
		other basis. Complete Part VI of Schedule D	10a 325,281			
	b	Less: accumulated depreciation	10b 1,687	324,872	10c	323,594
	11	Investments—publicly traded securities		0	11	0
	12	Investments—other securities. See Part IV, line	0	12	0	
	13	Investments—program-related. See Part IV, line	0	13	0	
	14	Intangible assets	0	14	0	
	15	Other assets. See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	781,203	16	719,641
	17	Accounts payable and accrued expenses		13,467	17	5,562
	18	Grants payable	0	18		
	19	Deferred revenue	0	19		
	20	Tax-exempt bond liabilities	0	20		
	21	Escrow or custodial account liability. Complete	0	21		
es	22	Loans and other payables to current and forme	r officers, directors,			
Liabilities		trustees, key employees, highest compensated	employees, and			
ap		disqualified persons. Complete Part II of Sched	ule L	0	22	
J	23	Secured mortgages and notes payable to unrela	ated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelate	d third parties	0	24	0
	25	Other liabilities (including federal income tax, pa	ayables to related third			
		parties, and other liabilities not included on lines	s 17–24). Complete Part X			
				0	25	0
	26	Total liabilities. Add lines 17 through 25		13,467	26	5,562
		Organizations that follow SFAS 117 (ASC 958	3), check here X and			
es		complete lines 27 through 29, and lines 33 ar	the state of the s			
nc	27	Unrestricted net assets		634,220	27	572,763
ala	28	Temporarily restricted net assets		115,000	28	122,800
	29	Permanently restricted net assets		18,516	29	18,516
Net Assets or Fund Balances		그림생이 그래요 보이에게 시간하면 하는 그리고 그리고 하는 사람들이 사이기 없다.		10,010		10,010
L		Organizations that do not follow SFAS 117 (ASC958),	check here and)		
S		complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds		0	30	
ASS	31	Paid-in or capital surplus, or land, building, or e		0	31	
et	32	Retained earnings, endowment, accumulated in		0	32	
Z	33	Total net assets or fund balances		767,736	33	714,079
	34	Total liabilities and net assets/fund balances.		781,203	34	719,641

Check if Schedule O contains a response or note to any line in this Part XI.	Par	Reconciliation of Net Assets				
Total expenses (must equal Part IX, column (A), line 25). Revenue less expensess. Subtract line 2 from line 1. Revenue less expensess. Subtract line 2 from line 1. Revenue less expensess. Subtract line 2 from line 1. Ret assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). Ret assets or fund balances at he ginning of year (must equal Part X, line 33, column (A)). Ret assets or fund balances at he ginning of year (must equal Part X, line 33, column (B)). Ret assets or fund balances (explain in Schedule O). Ret assets or fund balances (explain in Schedule O). Ret assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. 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 O. Were the organization's financial statements compiled or reviewed by an independent accountant? Separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? Separate basis Consolidated basis Both consolidated and separate basis Were the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. Separate basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis consolidated basis Both consolidated and separate basis Fire yes, "to line 2 a or 2 b, does the organization have a committee that assumes responsibility for oversight of th		Check if Schedule O contains a response or note to any line in this Part XI	4 4 4		. [
2 560,744 3 Revenue less expenses. Subtract line 2 from line 1 3 53,657 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 767,736 5 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 7 6 Donated services and use of facilities 7 7 Investment expenses 7 7 8 8 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 714,079 Part XII Financial Statements and Reporting 714,079 Part XII Financial Statements on the Form 990:	1	Total revenue (must equal Part VIII, column (A), line 12)	1		507	,087
At Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990:	2		2		560	,744
5 Net unrealized gains (losses) on investments	3	Revenue less expenses. Subtract line 2 from line 1	3		-53	,657
Cash X Accounting method used to prepare the Form 990: Cash X Accrual Other if the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited basis Both consolidated and separate basis Consolidated basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compiliation 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 in Schedule O. If the organization changed either its oversight or equired to undergo an audit or audits as set forth in the Single Audi	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		767	,736
7 Investment expenses 7 7 8 8 9 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 714,079 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	5	Net unrealized gains (losses) on investments	5			
Other changes in net assets or fund balances (explain in Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. 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 O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 Both consolidated and separate basis 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 Consolidated basis Both consolidated and separate basis 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 in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b If "Yes," did the organization undergo the required audit or audits. B Accounting That Accounting The Total Part X II. Yes II. Accounting That Accounting The Total Part X II. Yes II. Yes II. Accounting The Accounting The Total Pa	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Tinancial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: Cash Accounting method used to Preta III Fyes, "check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis Consolidated basis Both consolidated and separate ba	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. 1 Accounting method used to prepare the Form 990:	8	Prior period adjustments	8			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990:	9	Other changes in net assets or fund balances (explain in Schedule O)	9			
Part 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:	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	LATE IT			
Check if Schedule O contains a response or note to any line in this Part XII . Yes No Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 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 Were the organization's financial statements audited by an independent accountant? 2b X 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, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b		column (B))	10		714	,079
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 O. Were the organization's financial statements compiled or reviewed by an independent accountant? 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 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 Consolidated basis Both consolidated and separate basis 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 in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? B If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b If "Yes," did the organization why in Schedule O and describe any steps taken to undergo such audits. B Yes No Tother explain in Schedule O. B Yes No Tother explain in Schedule O. Tother explain	Part				1	
Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII	2.00	1 4 4	*	7.3
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 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 Consolidated basis Both consolidated and separate basis 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 in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b	1	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			163	
b Were the organization's financial statements audited by an independent accountant?	2a	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		2a		X
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 Consolidated basis Both consolidated and separate basis 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 in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b		Separate basis Consolidated basis Both consolidated and separate basis				
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?	b	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:	b (2b		X
the audit, review, or compilation of its financial statements and selection of an independent accountant?		Separate basis Doth consolidated and separate basis				
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1		
the Single Audit Act and OMB Circular A-133?		If the organization changed either its oversight process or selection process during the tax year, explain in		2c		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	3a			32		×
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	h			Ja		
	D	그 이 그 아이들은 이번 살이면 하면 두었다면 그가 이번 그가 이번 이름이 되었다. 이번 수있는 것이 되었다면 하면 하는데 그 아이들은 사람이 되었다면 하는데 그렇게 되었다면 하는데 그렇게 되었다.		3h		
	-	required addit of addits, explain why in schedule of and describe any steps taken to didenge such addits.			990	20191

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection Employer identification number

		ic organization					Linployer identification	mannber		
		ERN WATERS LAND TRUST		The second of the second			41-188	37906		
	rt I	Reason for Public Cha								
The	orga	anization is not a private founda A church, convention of church	the state of the second st	[10] [20] - 10 [10] [10] - 10 [10] [10] - 10 [10] [10] [10] [10] [10] [10] [10] [the same of the same of the	• • • • • • • • • • • • • • • • • • • •			
2		A school described in section	170(b)(1)(A)(ii). (A	ttach Schedule E (Form	990 or 99	90-EZ).)				
3		A hospital or a cooperative hos	spital service organ	ization described in sec	tion 170	b)(1)(A)(ii	i).			
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's name, city, and state:								
5		An organization operated for the section 170(b)(1)(A)(iv). (Con	ne benefit of a colle	ge or university owned	or operate	ed by a go	vernmental unit desc	ribed in		
6		A federal, state, or local govern		ental unit described in se	ection 170)(b)(1)(A)(w)			
7	H	An organization that normally i						al nublic		
		described in section 170(b)(1)	(A)(vi). (Complete	Part II.)		i i i i i i i i i i i i i i i i i i i	anit of from the gener	ai public		
8		A community trust described in	section 170(b)(1)	(A)(vi). (Complete Part	II.)					
9		An agricultural research organ or university or a non-land-gra university:								
10	X	An organization that normally r receipts from activities related support from gross investment acquired by the organization a	to its exempt functi income and unrela	ons—subject to certain ted business taxable in	exception come (les	s, and (2) s section	no more than 33 1/3 511 tax) from busines	% of its		
11		An organization organized and	operated exclusive	ely to test for public safe	ety. See se	ection 509	9(a)(4).			
12		An organization organized and of one or more publicly suppor Check the box in lines 12a thro	ted organizations d	escribed in section 509	(a)(1) or	section 50	9(a)(2). See section	509(a)(3).		
a	[Type I. A supporting organization(organization. You must con	zation operated, su s) the power to reg nplete Part IV, Sec	pervised, or controlled lularly appoint or elect a ctions A and B.	oy its supp majority o	orted orga of the direc	anization(s), typically ctors or trustees of th	by giving e supporting		
k) [Type II. A supporting organi control or management of the organization(s). You must o	ne supporting organ complete Part IV, S	nization vested in the sa Sections A and C.	ame perso	ns that co	ntrol or manage the s	supported		
C	: [Type III functionally integr its supported organization(s						ated with,		
c	. [Type III non-functionally in that is not functionally integree requirement (see instruction	ntegrated. A supporated. The organiza	rting organization operation generally must sat	ated in cor isfy a distr	nnection w	rith its supported orga			
е	1	Check this box if the organize functionally integrated, or Ty	zation received a w	ritten determination from	n the IRS	that it is a		elli.		
f	5 [1]	Enter the number of supported						0		
9		Provide the following information		ted organization(s).						
	1 (i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
4)										
3)										
3)										
)										
Ξ)						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
		V								
nta	1						Λ.	0		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		A SHALL BY A				
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
5	Total. Add lines 1 through 3	0	0	0	0	0	0
14	shown on line 11, column (f)					1	-
6	Public support. Subtract line 5 from line 4 etion B. Total Support						0
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from				71		
9	Similar sources						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11	Total support. Add lines 7 through 10						0
12 13	Gross receipts from related activities, etc. (see First five years. If the Form 990 is for the org organization, check this box and stop here.	anization's first, se	econd, third, fourth,	or fifth tax year as	s a section 501(c)(12 3) 	
	tion C. Computation of Public Sup						
	Public support percentage for 2018 (line 6, col					14	0.00%
	Public support percentage from 2017 Schedul					15	0.00%
	33 1/3% support test—2018. If the organizat and stop here. The organization qualifies as a	a publicly supporte	ed organization				▶ 🗌
b	33 1/3% support test—2017. If the organization and stop here. The organization qualifies						
17a	10%-facts-and-circumstances test—2018. 10% or more, and if the organization meets the Part VI how the organization meets the "facts-organization	e "facts-and-circur and-circumstance	mstances" test, che s" test. The organiz	ck this box and st zation qualifies as	op here. Explain in a publicly supporte	n ed	. .
b	10%-facts-and-circumstances test—2017. 15 is 10% or more, and if the organization med Explain in Part VI how the organization meets supported organization.	ets the "facts-and- the "facts-and-cire	circumstances" tes cumstances" test. T	t, check this box a he organization q	and stop here. ualifies as a public	ly	
18	Private foundation. If the organization did no						
	instructions						

Page 3

NORTHERN WATERS LAND TRUST Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees				221.222	100 700	0.000.005
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise	244,990	113,130	975,768	204,309	498,768	2,036,965
	sold or services performed, or facilities						
	furnished in any activity that is related to the			- 4			0
2	organization's tax-exempt purpose						.0
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the	5 6 6 6 B		- 100			
	organization without charge						0
6	Total. Add lines 1 through 5	244,990	113,130	975,768	204,309	498,768	2,036,965
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3						
	received from other than disqualified						Y
	persons that exceed the greater of \$5,000			- 4	- 1		
	or 1% of the amount on line 13 for the year		0	0	0		0
	Add lines 7a and 7b	- 0	0	0	0	0	0
8	Public support (Subtract line 7c from	7					2,036,965
Sor	tine 6.)						2,030,903
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	244,990	113,130	975,768	204,309	498,768	2,036,965
	Gross income from interest, dividends,	211,000	110,100	010,700	20.1,000	1981,19	-1222122
100	payments received on securities loans, rents,						
	royalties, and income from similar sources	805	1,131	741	1,363	413	4,453
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			1	91		
	acquired after June 30, 1975						0
C	Add lines 10a and 10b	805	1,131	741	1,363	413	4,453
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets	100		0.070	4.070	7.000	17.007
	(Explain in Part VI.)	488	1,631	3,072	4,870	7,906	17,967
13	Total support. (Add lines 9, 10c, 11,	0.40.000	445.000	070 504	040.540	507.007	0.050.005
	and 12.)	246,283	115,892	979,581	210,542	507,087	2,059,385
14	organization, check this box and stop here.	every first professional and the contract of the con-		for a sittle or as a service for the form			
Sac	tion C. Computation of Public Sup				1010000	7-7-9-3-1-0-1-0-1	
15	Public support percentage for 2018 (line 8, co			1)		15	98.91%
16	Public support percentage for 2017 Schedul					16	98.93%
_	tion D. Computation of Investment						00,0070
17	Investment income percentage for 2018 (line			lumn (f))		17	0.22%
18	Investment income percentage from 2017 Sch				the state of the s	18	0.44%
	33 1/3% support tests—2018. If the organization					and line 17 is	
	not more than 33 1/3%, check this box and st						▶ X
b	33 1/3% support tests—2017. If the organization						
	line 18 is not more than 33 1/3%, check this b						
20	Private foundation. If the organization did no	ot check a box on li	ne 14, 19a, or 19b	, check this box an	d see instructions		a - a - a - b

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations						
1	Are all of the organization's supported organizations listed by name in the organization's governing					

class or purpose, describe the designation. If historic and continuing relationship, explain.

- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

-,-1	Yes	No
1		
2		
3a		
3b		
3с		
4a	1.1	
4b		
4c		

5a		
5b		
5с		
		<u> </u>
6		
7		
8		
9a		
Ja		
9b		
9c		
50		
40-		
10a	4	1
10b		

Part	V Supporting Organizations (continued)		1	1
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b	_	
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Seci	ion B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	163	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2).
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
C4	supported organizations played in this regard.	3	بنيا	
1 a	ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see Integral Part Test during	nstruction	ıs).	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instru	ctions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

instructions. All other Type III non-functionally integrated supporting organ Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		y
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	0	0
Section B - Minimum Asset Amount	d)i	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		0

-	e A (Form 990 or 990-EZ) 2018 NORTHERN WATERS LAND T			1-1887906 Page 7			
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)				
Section	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exe	empt purposes					
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported					
3							
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.			0			
8	Distributions to attentive supported organizations to which to (provide details in Part VI). See instructions.	he organization is respor	nsive				
9	Distributable amount for 2018 from Section C, line 6			0			
10	Line 8 amount divided by line 9 amount	4		0.000			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
_ 1	Distributable amount for 2018 from Section C, line 6			0			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.						
3	Excess distributions carryover, if any, to 2018						
а	From 2013 0						
b	From 2014 0			SECTION SAFE			
С	From 2015						
d	From 2016 0						
е	From 2017 0			= = = = = = = = = = = = = = = = = = = =			
f	Total of lines 3a through e	0					
g	Applied to underdistributions of prior years		0				
h	Applied to 2018 distributable amount			0			
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0					
4	Distributions for 2018 from Section D, line 7: \$ 0						
а	Applied to underdistributions of prior years		0				
	Applied to 2018 distributable amount		0	0			
C	Remainder. Subtract lines 4a and 4b from 4.	0					
5	Remaining underdistributions for years prior to 2018, if						
	any. Subtract lines 3g and 4a from line 2. For result						
	greater than zero, explain in Part VI. See instructions.		0				
6	Remaining underdistributions for 2018. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.			0			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.	0					
8	Breakdown of line 7:						
a	Excess from 2014 0						
b	Excess from 2015 0						
С	Excess from 2016 0						
d	Excess from 2017 0						
е	Excess from 2018 0		4				

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,

► 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.

2018
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

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

	of the organization	Employer ide	entification number
200	THERN WATERS LAND TRUST	- N	41-1887906
Par			counts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.		
	(a) Donor advised funds	(k	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 writing that the assets held		
	funds are the organization's property, subject to the organization's exclusive legal contro		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant		
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a		
	conferring impermissible private benefit?	101 111	Yes No
Par			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
	X Preservation of land for public use (e.g., recreation or education) Preservation	on of a histor	rically important land area
	Protection of natural habitat Preservation	on of a certifi	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form	of a conservation
	easement on the last day of the tax year.	ar in tale retu	Held at the End of the Tax Year
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure included in (a)		
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a		
	historic structure listed in the National Register	20	i d
3	Number of conservation easements modified, transferred, released, extinguished, or terr	minated by th	ne organization during
	the tax year 🕨		
4	Number of states where property subject to conservation easement is located		1
5	Does the organization have a written policy regarding the periodic monitoring, inspection	, handling of	
	violations, and enforcement of the conservation easements it holds?		X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	conservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cons	servation ease	ements during the year
	\$	2000	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easements in its revenue		
	balance sheet, and include, if applicable, the text of the footnote to the organization's final	ancial statem	nents that describes the
-	organization's accounting for conservation easements.	0.1 01	
Part			milar Assets.
4.	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.		ourse and tratages of see
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r		
	works of art, historical treasures, or other similar assets held for public exhibition, educat		
h	public service, provide, in Part XIII, the text of the footnote to its financial statements that		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reversable of set, historical transpures, or other similar assets held for public exhibition, educate		
	works of art, historical treasures, or other similar assets held for public exhibition, educat		
	public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 000. Part V		• • • • • • • • • • • • • • • • • • •
2	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other similar asset		aai gain, provide the
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these it	tellis.	2
d	Revenue included on Form 990, Part VIII, line 1		¢

THE REAL PROPERTY.	NOTHINE AT TO THE	ENG ENG THOU	V V6V V	ALCOHOLD I		7			
Par	t III Organizations Maintaining (ed)
3	Using the organization's acquisition, a	ccession, and other	records, o	check any	of the following	ig that	are a significant	use of its	
	collection items (check all that apply):								
a	Public exhibition		d	Loan or	exchange pro	grams			
b	Scholarly research		e	Other					
С	Preservation for future generation	S							
4	Provide a description of the organization		explain he	ow they fu	urther the orga	nizatio	n's exempt purpo	se in Part	
	XIII.		501990111		7.6.5. 615.519	5000000	20 2. 2002000000000000	250000000	
5	During the year, did the organization s	olicit or receive don	ations of a	art histori	cal treasures.	or othe	er similar		
	assets to be sold to raise funds rather							Yes	No
Par	A TO DOTA A CONTRACTOR OF A STATE		5.0 B3 16 X13	284011460146	9				
I CI	Complete if the organization a		n Form 9	90 Part	IV line 9 or	reno	rted an amount	on Form	
	990, Part X, line 21.	anowordd 100 0	iii oiiii o	00, 1 011	14, 1110 0, 01	торо	tod dir diriodiri	on round	
1a	Is the organization an agent, trustee, or	ustodian or other in	termediar	v for cont	ributions or oth	ner ass	sets not		
ia	included on Form 990, Part X?							Yes	□ No
b	If "Yes," explain the arrangement in Pa								Ш 1,00
~	ii ree, explain the arrangement ii r	art 7th and complete	110 101101	ing table			1	Amount	
C	Beginning balance					10		220,020,00	0
d	Additions during the year					10			
е	Distributions during the year					16			
f	Ending balance					11			0
2a	Did the organization include an amoun	t on Form 990. Par	t X. line 2	l. for escr	ow or custodia	al acco	unt liability?	Yes	X No
b	If "Yes," explain the arrangement in Pa								
_		III AIII. OHOOK HOIC	ii tile expi	anationn	as been provid	cu on	Turrym	U. Care	Ы.
Par	Endowment Funds. Complete if the organization a	nawarad "Vaa" a	n Form C	OO Dort	IV line 10				
	Complete if the organization a	(a) Current year	(b) Pric		(c) Two years b	nack	(d) Three years back	(a) Four	years back
10	Posinning of year halance	(a) Current year	(b) Fix	0	(c) Two years t	0		0	0
1a	Beginning of year balance	U		U		U		3	- 0
b	Net investment earnings, gains,							+	
С	and losses								
d	Grants or scholarships				7	-			
e	Other expenditures for facilities							+	
	and programs								
f	Administrative expenses								
g	End of year balance	0		0		0		0	0
2	Provide the estimated percentage of the		balance (I					-1	
a	Board designated or quasi-endowmen		%		(-// /····				
b	Permanent endowment	%							
c	Temporarily restricted endowment	▶ %							
	The percentages on lines 2a, 2b, and 2	2c should equal 100)%.						
3a	Are there endowment funds not in the	possession of the o	rganizatio	n that are	held and adm	inister	ed for the		
	organization by:							Y	es No
	(i) unrelated organizations		2 1 1 1 2					3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related or	ganizations listed a	s required	on Sche	dule R?			3b	
4	Describe in Part XIII the intended uses	of the organization	's endowr	nent fund	S.				
Part	이 그 사람은 이번 그 가장 아니라가 아니까지 아니다 하는데 하는데 하는데 하는데 다 하다.								
	Complete if the organization a	inswered "Yes" o	n Form 9	90, Part	IV, line 11a.	See I	Form 990, Part	X, line 10).
	Description of property	(a) Cost or ot		1 100	or other basis		Accumulated	(d) Book	value
	The second secon	(investm		(1	other)	C	lepreciation		
1a	Land	11	317,000	vi .	0				317,000
b	Buildings. ,	7 A 34	0		0		0		0
C	Leasehold improvements		0		0		0		0
d	Equipment		0		8,281		1,687		6,594
_ e	Other		0	7	0		0		0
Iota	I. Add lines 1a through 1e. (Column (d) r	nust equal Form 99	U, Part X,	column (l	B), line 10c.) ,				323,594

Schedule D (Form 990) 2018

Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11b. See Form 990, F	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market	
(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other			
(A)		A	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	0		
Part VIII Investments—Program Related.	0		
Complete if the organization answered	"Yes" on Form 990	Part IV line 11c. See Form 990. F	Part X line 13
		(c) Method of valuation:	
(a) Description of investment	(b) Book value	Cost or end-of-year market	value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0		
Part IX Other Assets.	IIVII F 000	D-+ IV II 44-1 C F 000 F	0-4 V 11 45
Complete if the organization answered		Part IV, line 11d. See Form 990, F	(b) Book value
(a) Desc	прион		(b) Book value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11e or 11f. See Form	990, Part X,
line 25.			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	0		
(2)		5.3	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		+ x.	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	0		
Total. [Column [b] must equal Form 990, Fart A, Col. [b] line 25.]	U		

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

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1.1	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	20	0
e	Add lines 2a through 2d	2e	0
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	0
	Investment expenses not included on Form 990, Part VIII, line 7b		
a b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		0
-	t XII Reconciliation of Expenses per Audited Financial Statements With Expense		
ı aıı	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	5 per Return.	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	. 3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
-			
b	Other (Describe in Part XIII.)		
b	Other (Describe in Part XIII.)	4c	0
b			0
b c 5 Part Provid	Add lines 4a and 4b	2b; Part V, line 4; Pa	0
b c 5 Part Provid	Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIII Supplemental Information.	2b; Part V, line 4; Pa	0
b c 5 Part Provid	Add lines 4a and 4b	2b; Part V, line 4; Pa	0
b c 5 Part Provid	Add lines 4a and 4b	2b; Part V, line 4; Pa	0

Schedule D (Fo		NORTHERN WA	TERS LAND TRUS	ST			41-1887906	Page 5
Part XIII	Suppleme	ental Informatio	n (continued)					

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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OMB No. 1545-0047

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

41-1887906

Employer identification number

LAND ACQUISITION N (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance × Yes noncash assistance (g) Description of Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. . . (f) Method of valuation (book, FMV, appraisal, . . . è Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . 17,500 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table. General Information on Grants and Assistance the selection criteria used to award the grants or assistance? . (c) IRC section (if applicable) (b) EIN NORTHERN WATERS LAND TRUST (1) MN DEPT OF NATURAL RESOUR 500 LAFAYETTE RD ST PAUL, MN 55 1 (a) Name and address of organization or government Part I Part II (10) (11) (12) 2 (2) (3) 4 (2) (9) 0 (8) (6)

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

Schedule I (Form 990) (2018)

Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Schedule I (Form 990) (2018) Part III

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 2 9

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047
2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

NORTHERN WATERS LAND TRUST	41-1887906
Form 990, Part VI, Section B, Line 11b: Form 990 is first reviewed by the Executive Director	
and Treasurer of the Organization and then it is presented to the Board for approval before	
submission.	
Form 990, Part VI, Section C, Line 19: The Organization's documents are available to anyor	ne
who requests them. The Organization does maintain a website but the financial information	S
not posted to it. Upon request, any information will be provided either in person or	
electronically.	
Form 990, Part VI, Section B, Line 12c: Upon election to the Board, officers and directors are	e
required to disclose any conflicts of interest.	
