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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A F	or the	2009 cal	endar year, or tax year beginning SEP 1, 2009 and ending	AUG 31, 2010				
В	heck if	Please	C Name of organization	D Employer identifi	cation number			
а	pplicable	use IRS	ND SOCIETY OF CERTIFIED PUBLIC					
	Addre:	ss label or print or	ACCOUNTANTS					
	Name change	type	Doing Business As	23-7	188243			
	Initial return	See	Number and street (or P.O. box if mail is not delivered to street address) Room/s	suite E Telephone numbe	er			
	Termir ated	- Specific Instruc-	2701 S COLUMBIA RD	701-	775-7100			
	Ameno		City or town, state or country, and ZIP + 4	G Gross receipts \$	638,883.			
	Applic	a-	GRAND FORKS, ND 58201	H(a) Is this a group r				
	pendir	F Nan	ne and address of principal officer: JIM ABBOTT	for affiliates?	Yes X No			
			e as C above	H(b) Are all affiliates in	cluded? Yes No			
I Tax-exempt status: X 501(c) (6) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list (see instructions)								
			w.ndscpa.org	H(c) Group exemption				
				Year of formation: 1971				
	art I	Summ						
_	1		scribe the organization's mission or most significant activities TO DEVEI	OP AND MAINTA	IN ITSELF			
Governance	•	-	ORGANIZATION WHICH MEETS THE NEEDS OF					
Ē	1		s box Fig. 1 if the organization discontinued its operations or disposed of					
Ve	i		f voting members of the governing body (Part VI, line 1a)	3	12			
ŏ			f independent voting members of the governing body (Part VI, line 1b)	4	12			
•ජ ග	5		ber of employees (Part V, line 2a)	5	0			
ij	6		ber of volunteers (estimate if necessary)	6	0			
DERevenue In In Activities &	7a		s unrelated business revenue from Part VIII, column (C), line 12	7a	8,138.			
ĕ) 'a	_	ated business taxable income from Form 990-T, line 34	7 <u>a</u>	0,150.			
=		INCL GITTER	ated business taxable alcome from Form 330 1, line 34	Prior Year	Current Year			
(50)	8	Contribut	ions and grants (Part VIII, line 1h)	176,912.	184,041.			
ొప్ప	0		- , , , , ,	351,738.	431,520.			
ভৌ	9	_	service revenue (Part VIII, line 2g)	9,716.	13,713.			
Se.	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)					
	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,166.	9,609.			
	12		nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	546,532.	638,883.			
	l		d similar amounts paid (Part IX, column (A), lines 1-3)					
2 3	t .	•	paid to or for members (Part IX, column (A), line 4)	160.000				
xpenses, MED	l		other compensation, employee benefits (Part IX, column (A), lines 5-10)	167,820.				
250	16a	Profession	nał fundraising fees (Part IX, column (A), line 11e)					
ΨŽ	b	Total fund	Iraising expenses (Part IX, column (D), line 25)					
ш			enses (Part IX, column (A), lines 11a-11d, 11f-24f)	326,728.	578,277.			
	18	Total expe	enses Add lines 13-17 (must equal Part IX, column (A), (the 25) EIVED	494,548.	578,277 .			
	19		ess expenses. Subtract line 18 from line 12	51,984.	60,606.			
SS			w vov o o oo o	Beginning of Current Year	End of Year			
agets	20	Total asse	ets (Part X, line 16) 8 NOV 2 2 2010	408,636. 2 101,280.	568,107.			
Net Assets or Fund Balances	21	Total liabil	Ities (Part X, line 26)	图 101,280.	191,036.			
원	22	Net asset	s or fund balances Subtract line 21 from line 20 OCDEN 11T.	307,356.	377,071.			
Pa	art II	Signa	ture Block					
		Under pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and statem te Declaration of preparer/(other than officer) is based on all information of which preparer has any know	ents, and to the best of my knowled	ge and belief, it is true, correct,			
		a io compio			1			
Sig	n		Soldy Smith	////	110			
Her	е	Sign	nature of officer	Date				
President - Gordy Smith								
		Тур	e or print name and title		· · · · · · · · · · · · · · · · · · ·			
Preparer's Date Check If Preparer's identifying number (see instructions)								
Paid		signature	self- employed (see in	sudctions				
-	parer's	Firm's name	Drees, Riskey & Vallager, LTD.	EIN ▶				
Use Only yours if Self-employed), 1405 Library Circle								
		address, an ZIP + 4	Grand Forks, ND 58201	Phone no > /	701)746-4466			
Mar	the II		s this return with the preparer shown above? (see instructions)	1. 110110 110.	X Yes No			
	01 02-0		A For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions	Form 990 (2009)			
0020	UZ-U	,-,- 10 LI		,	. 0 (2003)			

	1 990 (2009)	ACCOUNTANTS		23-7188243	Page 2
Pa	rt III Statement	of Program Service Acco	omplishments		
1	Briefly describe the	organization's mission:			
	TO DEVELOP	AND MAINTAIN ITS	<u>SELF AS AN ORGANIZATION</u>	WHICH MEETS THE	
	NEEDS OF A	LL MEMBERS AND TI	HE ACCOUNTING PROFESSION	ON.	
2	Did the organization	undertake any significant progra	n services during the year which were not list		_
	the prior Form 990 o	or 990-EZ?		Yes	X No
	•	iese new services on Schedule O			
3		= = = = = = = = = = = = = = = = = = = =	icant changes in how it conducts, any progra	am services? Yes	X No
	If "Yes," describe th	ese changes on Schedule O.			
4			of the organization's three largest program se		
	Section 501(c)(3) an	d 501(c)(4) organizations and sec	tion 4947(a)(1) trusts are required to report th	e amount of grants and	
	allocations to others	s, the total expenses, and revenue	, if any, for each program service reported.		
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
			OURCES AND MEMBERSHIP I		<u> </u>
	ADVANCEMEN	T OF ITS MEMBERS	AND THE ACCOUNTING PRO	FESSION	
				·	

				····	
4 b	(Codo) /Evpoppo ¢	unalluding grants of ¢) (Payanya ¢	
4b	(Code.) (Expenses \$	including grants of \$) (Revenue \$)
			·····		
					
	-				
			1115-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
					
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$	١
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3 3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
		7.1			
			1.00		
	<u> </u>				
4d	Other program servi	ces. (Describe in Schedule O.)			
	(Expenses \$	including grants	of \$) (Revenue \$)	
4e	Total program serv	ice expenses > \$			

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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," complete Schedule A X . . . 1 ... Is the organization required to complete Schedule B, Schedule of Contributors? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 X 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," complete Schedule D. Part III 8 X Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable X 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. X 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? No Yes If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20

ACCOUNTANTS Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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 a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III X 27 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): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 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 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

Note. All Form 990 filers are required to complete Schedule O.

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

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X

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			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> X</u>
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.	F-		v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
b	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	5b		
C	Tou Chatter Transaction?	5c		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
-	any contributions that were not tax deductible?	6a		х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		
	benefit contract?	<u>7е</u>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g 7h		
A.	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	/11		
•	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			3000)

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

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent <u>1b</u> 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	_3_		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6	X	
7a				
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	_7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	X_	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		_X_
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х	
11A				
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
40	In Schedule O how this is done	12c	77	<u> </u>
13	Does the organization have a written whistleblower policy?	13	X	
14 45	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	40-		v
a 	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a		<u>X</u>
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)	15b		<u>X</u>
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
.Ja	taxable entity during the year?	16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	10a		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	ıd fina	ncıal	
	statements available to the public.	u iiia	····ai	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizate	ion 🖿	•	
	NDSCPA - 701-775-7100			
	2701 SOUTH COLUMBIA ROAD, GRAND FORKS, ND 58201			

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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. Use Schedule J-2 if additional space is needed.

- 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. 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.

(A) Name and Title	(B) Average		(C) Position		(D) Reportable	(E) Reportable	(F) Estimated				
Name and Title	hours	(c				' арр	Iv)	compensation	compensation	amount of	
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
KEVIN AUSTIN											
PAST PRESIDENT	0.00	X		X		ļ		0.	0.	0.	
CLARENCE SITTER					ł						
DIRECTOR	0.00	X						0.	0.	0.	
LEN SPLICHAL											
SECRETARY	0.00	X		X		ļ		0.	0.	0 .	
GORDY SMITH										•	
PRESIDENT	0.00	X		X				0.	0.	0.	
MARY BADER											
DIRECTOR	0.00	X				<u> </u>		0.	0.	0 .	
STEVE BRITSCH						1					
DIRECTOR	0.00	X						0.	0.	0.	
MICHAEL SCHMITZ						l					
PRESIDENT - ELECT	0.00	X		X				0.	0.	0.	
TERESA HOLT											
DIRECTOR	0.00	X						0.	0.	0.	
RICK HORN											
DIRECTOR	0.00	X				<u> </u>		0.	0.	0.	
PATRICK KAUTZMAN											
DIRECTOR	0.00	X						0.	0.	0 .	
DIANNA KINDSETH											
DIRECTOR	0.00	X						0.	0.	0.	
TARYCE MALNAA											
DIRECTOR	0.00	X				l		0.	0.	0.	
JAMES S. ABBOTT											
EX. DIRECTOR	20.00			X				0.	0.	0.	
···											
		_									
		Ī									
				_							

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Par	t VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, a	nd I	High	est	Compensated Employ	ees (continued)				
	(A) (B) (C) Name and title Average Position			(D) (E)		(F)								
	Name and title	Average hours	(6)				app	l. A	Reportable compensation	Reportable	1			
		per week	Individual trustes or director	institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC		comp fro orga and	other pensation the anization relate nization	tion e on ed
												-		
											\downarrow		-	
			ļ								\dashv	- ,		
											_			
											_			
											_			
											\dashv			
1b	Total		L	Li		L			0.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	DOVE	e) wh	io re			<u> </u>			
	compensation from the organization									-				0
				_							г		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch ındivıdual									-	3		x
4	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual		ļ	4		x
5 	the organization? If "Yes," complete Sched tion B. Independent Contractors					апу	, uiii	eiai	ed organization for serv			5		х
1	Complete this table for your five highest co	mpensated ind	depe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of comp	ensa	ition fr	om	
	(A) Name and business	address							(B) Description of s	ervices	Cc	(C		—— 1
								_						
								_						
	Total number of independent contractors (i	ncludina but n	ot lu	mite	d to	the	se lis	sted	above) who received m	ore than				
	\$100,000 in compensation from the organic	_					0					-om C	200 (0	1000

Page 9

Form 990 (2009)

Form 990 (2009)

932009 02-04-10

23-7188243 ACCOUNTANTS Part VIII Statement of Revenue (D) Revenue excluded from (B) (C) (A) Total revenue Related or Unrelated tax under sections 512, exempt function business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts Federated campaigns 1a 184,041. Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ 184,041 h Total. Add lines 1a-1f **Business Code** 324,958 324,958. 2 a CPE INCOME 541900 Program Service Revenue 87,002. 541900 87,002. **b** CONVENTION 17,530. 541900 17,530. c PEER REVIEW 2,030. 2,030. d YOUNG PROFESSIONALS GR 541900 All other program service revenue 431,520 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 13,713 13,713. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 а b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 8,138 8,138. 11 a ADVERTISING 541800 ь MISCELLANEOUS 900099 1,471. 1,471 C All other revenue 9,609. Total. Add lines 11a-11d 638,883. 432,991. 8,138. 13,713. Total revenue. See instructions 12

Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All outer organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		-		-
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management	174,630.			
b	Legal	-			
C	Accounting	4,670.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	·			
g	Other .				
12	Advertising and promotion	·			
13	Office expenses	9,506.			
14	Information technology				
15	Royalties				
16	Occupancy	11,582.			
17	Travel	4,840.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	35,551.			
20	Interest .				
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	0.400			
23	Insurance	2,488.			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)	210 010			
a	CPE EXPENSES	210,919.			
b	CONVENTION	81,385.			
C	BANK & CREDIT CARD CHAR	13,855.			
d	NEWSLETTER	10,836.			·
e	PEER REVIEW	10,579.			
f or	All other expenses	7,436.			
25	Total functional expenses. Add lines 1 through 24f	578,277.			
26	Joint costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		L		

ACCOUNTANTS

Part X Balance Sheet (A) Beginning of year End of year 81,477. 200,014. Cash - non-interest-bearing 2 Savings and temporary cash investments 90,672. 2 80,534. 3 Pledges and grants receivable, net 3 405. 553. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L Notes and loans receivable, net 7 Inventores for sale or use 8 15,628. 11,434. Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other 36,223. basis, Complete Part VI of Schedule D 10a 33,699 2,532. 2,524. b Less: accumulated depreciation 10b 217,922. 273,048. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 408,636. 568,107. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 8,608. 13,241. 17 Accounts payable and accrued expenses 17 Grants payable 18 18 92,672. 177,795. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities. Complete Part X of Schedule D 25 101,280 191,036. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets ... 307,356. 377,071. 27 27 28 Temporanly restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 307,356. 377,071. 33 Total net assets or fund balances 33 408,636. 568,107. Total liabilities and net assets/fund balances

Form **990** (2009)

ACCOUNTANTS

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Part XI Financial Statements and Reporting No 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? 2a b Were the organization's financial statements audited by an independent accountant? X 2b 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. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Consolidated basis Both consolidated and separate basis X Separate basis 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? 3а X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

3b

23-7188243 Page 12

Form 990 (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

Section 527 organizations Complete Part I-A only.

Continue FO1/a)/4) /F) or (6) argonizations. Complete Dart III

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

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

If the organization answered	"Yes," to	Form 990,	Part IV,	line 5 (Proxy	Tax), then
------------------------------	-----------	-----------	----------	---------------	------------

	Section 50 (c)(4), (5), or (6) organiza				
Nan	ne of organization ND SOCI	ETY OF CERTIFIE	D PUBLIC	Empl	oyer identification number
	ACCOUNT	ANTS			23-7188243
Pa	art I-A Complete if the org	ganization is exempt ur	nder section 501(c)	or is a section 527 o	rganization.
1	Provide a description of the organization	zation's direct and indirect poli	tical campaign activities	ın Part IV	
2	Political expenditures	·		▶ \$	
3	Volunteer hours	•		•	
•		••		•	
Pa	art I-B Complete if the org	janization is exempt ur	nder section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization u	nder section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization mana	agers under section 4955	5 ▶\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 472	20 for this year?		Yes No
42	Was a correction made?				Yes No
t	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt ur	nder section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	section 527 exempt func	tion activities > \$	
	Enter the amount of the filing organ				
_	exempt function activities			▶ \$	
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-POL		
-	line 17b			, • \$	
4	Did the filing organization file Form	1120-POL for this year?	•••		Yes No
	Enter the names, addresses and er	•	 FIN) of all section 527 no		
J	For each organization listed, enter t		•	-	• •
	that were promptly and directly del	, -	•	•	
	(PAC). If additional space is needed	• •	•	parato oog. ogatoo taria or o	pomodi domon dominico
	•	T		(a) Amount and from	(-) A
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0	promptly and directly
				, , , , , , , , , , , , , , , , , , , ,	delivered to a separate
					political organization.
					If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the or	ganizatio	on is exe		on 501(c)(3) and file	23- ed Form 5768	/188243 Page 2			
(election under se									
A Check filing organiz G Check filing organiz G Check filing organiz		_	• •	average each					
Lin	its on Lob	bying Expe	nd "limited control" pr nditures unts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to in	luence pub	lic opinion (grass roots lobbying)						
b Total lobbying expenditures to in	•	•	, , ,						
c Total lobbying expenditures (add									
d Other exempt purpose expenditu	res								
e Total exempt purpose expenditur	es (add line	s 1c and 1c	d)						
f Lobbying nontaxable amount En	ter the amo	unt from th	e following table in bo	th columns.					
	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:								
Not over \$500,000	, ,		the amount on line 1e						
Over \$500,000 but not over \$1,00	00,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.					
Over \$1,000,000 but not over \$1,	500,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.					
Over \$1,500,000 but not over \$17	ess over \$1,500,000.								
Over \$17,000,000			-						
g Grassroots nontaxable amount (enter 25% of line 1f)									
h Subtract line 1g from line 1a. If ze	h Subtract line 1g from line 1a. If zero or less, enter -0-								
i Subtract line 1f from line 1c. If ze	ro or less, e	nter -0-		[
j If there is an amount other than z	ero on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720					
reporting section 4911 tax for this	s year?	· · · · · · · · · · · · · · · · · · ·				Yes No			
		at made a s		Section 501(h) n do not have to comp es 2a through 2f on pa					
	Lobi	ying Expe	nditures During 4-Ye	ar Averaging Period					
Calendar year (or fiscal year beginning in)	(a)	2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a Lobbying nontaxable amount									
b Lobbying ceiling amount		., .		* 💸 *	ş .··.,				
(150% of line 2a, column(e))									
c Total lobbying expenditures									
d Grasgraats poptavable amount	1								
d Grassroots nontaxable amount e Grassroots ceiling amount	 					-			
e Grassroots ceiling amount (150% of line 2d, column (e))	1								
(1567) of life 2d, Coldifier (e))	 					 			
f Grassroots lobbying expenditures	s								

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 ACCOUNTANTS 23-7188243 Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912				
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p Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add lines 1c through 1: a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912				
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j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	F04(-\/F		-41	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	၁ပ ၊ (င)(၁), or se	Ction	
			Yes	١
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2	X	
Did the organization agree to carryover lobbying and political expenditures from the pnor year?		3		
"Yes." Dues, assessments and similar amounts from members		1		-
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	S			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	tical			
expenditure next year?		4		
Taxable amount of lobbying and political expenditures (see instructions)		5		

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009

Open to Public Inspection

Name of the organization ND SOCIETY OF CERTIFIED PUBLIC

ACCOUNTANTS

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

(a) Donor advised funds

(b) Funds and other accounts

	organization answered "Yes" to Form 990, Part IV, line	6	and an a state of an arrangement of the state of the stat
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpos	e conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org.	anızatıon answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g , recreation or pl	leasure) Preservation of an h	nistorically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	m of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru		2c
	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by t	he organization during the tax
_	year ▶		
4	Number of states where property subject to conservation eas		-
5	Does the organization have a written policy regarding the per	<u> </u>	
	violations, and enforcement of the conservation easements it	****	Yes No
6 7	Staff and volunteer hours devoted to monitoring, inspecting, a Amount of expenses incurred in monitoring, inspecting, and e	-	
8	Does each conservation easement reported on line 2(d) above		
0	and section 170(h)(4)(B)(ii)?	e satisfy the requirements of section 17	Yes No
9	In Part XIV, describe how the organization reports conservation		
3	include, if applicable, the text of the footnote to the organization	•	•
	conservation easements.	on o manda statemente that desense	o the organization o accounting for
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of p	sublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these it	ems	
b	If the organization elected, as permitted under SFAS 116, to r	eport in its revenue statement and bala	ance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	research in furtherance of public servi	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		. • \$
	(ii) Assets included in Form 990, Part X		. > \$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financ	al gain, provide
	the following amounts required to be reported under SFAS 11	6 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$

_	dule D (Form 990) 2009 ACCOUNT					3-7188243 Page 2
Pai	t III Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or Oth	er Similar	Assets (continued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant use	of its collection items
	(check all that apply).					
а	Public exhibition	d	Loan or exc	hange programs		
ь	Scholarly research	е	Other_			
С	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explain	how they further t	he organization's ex	empt purpose	ın Part XIV.
5	During the year, did the organization solicit o	•	-	-		
	to be sold to raise funds rather than to be ma					. Yes No
Par	t IV Escrow and Custodial Arran				rm 990. Part I	
	reported an amount on Form 990, Par				555,	-,
1a	Is the organization an agent, trustee, custodi	· -	ary for contribution	s or other assets no	t included	
10	on Form 990, Part X?		•	is or other assets no	t included	Yes No
.	If "Yes," explain the arrangement in Part XIV					165 140
D	ir res, explain the arrangement in Part Alv	and complete the for	lowing table.			A
	December halones					Amount
	Beginning balance	****	• •		1c	
	Additions during the year		••••		1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
	Did the organization include an amount on Fe	orm 990, Part X, line	21?			Yes Mo
	If "Yes," explain the arrangement in Part XIV			-,-		
Par	t V Endowment Funds. Complete	f the organization and	swered "Yes" to Fo	rm 990, Part IV, line	10	
		(a) Current year	(b) Prior year		(d) Three year	s back (e) Four years back
1a	Beginning of year balance	49,867.	40,337.			
b	Contributions	5,500.	15,600.		ļ	
С	Net investment earnings, gains, and losses	281.	930.		<u> </u>	
d	Grants or scholarships	6,000.	7,000.			
е	Other expenditures for facilities		•			
	and programs					
f	Administrative expenses					
g	End of year balance	49,648.	49,867.			
2	Provide the estimated percentage of the year				•	
_	Board designated or quasi-endowment		%			
b	Permanent endowment > 35.21	%	_,,			
_						
	Are there endowment funds not in the posse	-	tion that are hold a	nd administered for	the erganizati	00
Ja	by:	SSION OF THE ORGANIZA	ulon that are neld a	na administered for	the Organizati	
	(i) unrelated organizations		•		•	
•	(ii) related organizations	المستسمية مم المعمل	s Cabadula DO		•	3a(ii) X
	If "Yes" to 3a(ii), are the related organizations	•				3b X
4 Do:	Describe in Part XIV the intended uses of the tVI Investments - Land, Building			D 17 1 10		
Fai						
	Description of investment	(a) Cost or ot basis (investin	1 ''	' '	Accumulated epreciation	(d) Book value
1a	Land					
	Buildings					
	Leasehold improvements					
	Equipment	36,2	223.		33,699	2,524.
	Other				ر د د ر د د	2/3/120
	. Add lines 1a through 1e (Column (d) must e	aual Form 990. Part :	X. column (B). line 1	(O(c))		2,524.
	The state of the s		1-/,			2/324

Schedule D (Form 990) 2009 ACCOUNTANTS	5		23-7188243 Page 3
Part VII Investments - Other Securities. S	ee Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	
Financial denvatives	-		
Closely-held equity interests			
Other			
			· · · · · · · · · · · · · · · · · · ·
			- ***
			· · · · · · · · · · · · · · · · · · ·
			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)		<u> </u>	
Part VIII Investments - Program Related.	See Form 990. Part X. line 13		
		(c) Method o	f valuation:
(a) Description of investment type	(b) Book value	Cost or end-of-ye	
			
			· · · · · · · · · · · · · · · · · · ·
	 		
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line			
(a) Description		(b) Book value
	, 		
	·····		
NEW TOTAL THE PROPERTY OF THE			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	<u> </u>		<u> </u>
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of liability	(b)	Amount	
Federal income taxes			
A STATE OF S		11	
· · · · · · · · · · · · · · · · · · ·			

2. FIN 48 Footnote. In Part XIV, 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. 932053 02-01-10

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

Sche	edule D (Form 990) 2009 ACCOUNTANTS							188243	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990	to A	udit	ed Fir	ancial S	State	nents	3	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				1			638	,883.
2	Total expenses (Form 990, Part IX, column (A), line 25)				. 2			578	,277.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				3			60	,606.
4	Net unrealized gains (losses) on investments				4				,109.
5	Donated services and use of facilities			_	5				
6	Investment expenses				6				
7	Pnor penod adjustments	_			. 7				
8	Other (Describe in Part XIV.)				. 8				
9	Total adjustments (net) Add lines 4 through 8				9			9	,109.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3				10				715.
Pai	rt XII Reconciliation of Revenue per Audited Financial State	ment	s W	ith Re	venue p	er Re	turn		
1	Total revenue, gains, and other support per audited financial statements						1	647	,992.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.								
а	Net unrealized gains on investments .	, <u>L</u>	2a		9,1	09.			
b	Donated services and use of facilities		2b						
С	Recoveries of prior year grants		2c						
d	Other (Describe in Part XIV.)	L	2d						
е	Add lines 2a through 2d						2e	9	,109.
3	Subtract line 2e from line 1		••				3	638	,883.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a						
b	Other (Describe in Part XIV)	L	4b						
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.)						5		<u>.883.</u>
Pai	rt XIII Reconciliation of Expenses per Audited Financial State	emen	ts W	/ith Ex	penses	per F	Return		
1	Total expenses and losses per audited financial statements					L	1	578	<u>,277.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1						
а	Donated services and use of facilities		2a						
b	Prior year adjustments		2b						
С	Other losses		2c						
d	Other (Describe in Part XIV.)	. L	2d						
е	Add lines 2a through 2d					L	2e		<u> </u>
3	Subtract line 2e from line 1					_	3	<u>578</u> ,	<u>.277.</u>
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 XIV)		4b						
С	Add lines 4a and 4b					L	4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				<u> </u>		5	<u>578</u>	<u> 277.</u>
Ь	rt XIV Supplemental Information								····
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa								4; Part
X, line	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co	omplete	this	part to	provide ai	ny addi	tional ir	formation	
									
								-	

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Open to Public Inspection

Name of the organization

ND SOCIETY OF CERTIFIED PUBLIC **ACCOUNTANTS**

Employer identification number 23-7188243

Form 990, Part I, Line 1, Description of Organization Mission:
ACCOUNTING PROFESSION.
Form 990, Part VI, Section A, line 6: THE ORGANIZATION HAS MEMBERS.
Form 990, Part VI, Section A, line 7a: THE MEMBERS ELECT THE BOARD OF L DIRECTOS.
Form 990, Part VI, Section A, line 7b: THE MEMBERS MUST APPROVE ALL
CHANGES TO THE BYLAWS.

Form 990, Part VI, Section B, line 10b: NO WRITTEN POLICIES FOR THE LOCAL
CHAPTERS, ONLY BYLAW GUIDELINES.
Form 990, Part VI, Section B, line 11: THE EXECUTIVE COMMITTEE WILL
APPROVE THE 990 AND THE BOARD MEMBERS ARE GIVEN THE OPPORTUNITY TO REVIEW
THE 990.
Form 990, Part VI, Section C, Line 19: UPON REQUEST

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▼ See separate instructions. ▶ Attach to Form 990.

Employer identification number

ND SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

Part

23-7188243

Direct controlling End-of-year assets Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt Part

organizations during the tax year.)					
(a) Name, address, and EIN of related organization	(b) Prmary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
ND CPA SOCIETY FOUNDATION - 23-7396686 2701 SO, COLUMBIA ROAD GRAND FORKS, ND 58201	THE SOCIETY SELECTS THE FOUNDATION'S TRUSTEES AND PROVIDES STAFF	North Dakota	501(c)(3)	4.d	

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

Schedule R (Form 990) 2009

CERTIFIED PUBLIC ND SOCIETY OF

ACCOUNTANTS Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

Page 2

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Percentage ownership Schedule R (Form 990) 2009 General or Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Ξ ate allocations? Yes No Disproportion-Ξ Share of total Income Share of end-of-year assets Type of entity (C corp, S corp, or trust) e Share of total Income (d)
Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>0</u> Direct controlling entity Primary activity Legal domicile (state or foreign country) <u>ပ</u> Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV

ND SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS

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Schedule R (Form 990) 2009

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line I if any entity is listed in Parts II, III, of IV of this schedule		Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		•
a Receipt of (I) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a X
b Gift, grant, or capital contribution to other organization(s)		tb X
c Gift, grant, or capital contribution from other organization(s)		15 X
d Loans or loan guarantees to or for other organization(s)		× ×
e Loans or loan quarantees by other organization(s)		×
f Sale of assets to other organization(s)		×
g Purchase of assets from other organization(s)		×
i Lease of facilities, equipment, or other assets to other organization(s)		:
j Lease of facilities, equipment, or other assets from other organization(s)		
k Performance of services or membership or fundraising solicitations for other organization(s)		×
	•	+
m sharing of facilities, equipment, mailing lists, or other assets		1m X
n Sharing of paid employees		1n X
o Reimbursement paid to other organization for expenses		<u>o</u>
n. Reimbursement hard by other organization for expenses		
	:	d d
q Other transfer of cash or property to other organization(s)		1a X
r Other transfer of cash or property from other organization(s)		
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	on thresholds	
(a) Name of other organization(s)	(b) Transaction Amo	(c) Amount involved
(1)		
(E)		
(4)		
(2)		
9		
32.183 02-04-10	Schedule R	Schedule R (Form 990) 2009

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ND SOCIETY OF CERTIFIED PUBLIC

ACCOUNTANTS Schedule R (Form 990) 2009 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

(a)	(q)	(0)	(P)	(e)	€	(6)	3
Name, address, and EIN of entity	Primary activity	nicile oreign	Are all partners section 501(c)(3) organizations?	Share of end-of- year assets	or- ns?	Code V-UBI amount in box 20	9 8 9
			Yes No			(Form 1065)	1 ' 1
							_
							- ,,-
							_

Schedule R (Form 990) 2009