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Form **990** | 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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
NORTHLAND FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 202 WEST SUPERIOR STREET NO 610 | Room/suite

City or town, state or country, and ZIP + 4
DULUTH, MN 55802

D Employer identification number 41-1554455

E Telephone number (218) 723-4040

G Gross receipts $ 31,087,127

F Name and address of principal officer
THOMAS RENIER
202 WEST SUPERIOR STREET NO 610
DULUTH,MN 55802

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW NORTHLANDFDN ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1986 | **M** State of legal domicile MN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
A RESOURCE FOR PEOPLE, BUSINESSES, AND COMMUNITIES IN NE MN WORKING TOWARD PROSPERITY THROUGH ECONOMIC AND SOCIAL JUSTICE

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	100
6	Total number of volunteers (estimate if necessary)	6	325
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,816,785	3,942,910
	9	Program service revenue (Part VIII, line 2g)	1,245,310	1,246,149
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,763,259	4,220,031
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,825,354	9,409,090
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	840,075	1,590,256
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,494,459	2,529,797
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶160,147		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,663,875	1,820,428
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,998,409	5,940,481
	19	Revenue less expenses Subtract line 18 from line 12	826,945	3,468,609

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	56,300,048	67,306,217
	21	Total liabilities (Part X, line 26)	11,041,372	12,218,629
	22	Net assets or fund balances Subtract line 21 from line 20	45,258,676	55,087,588

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2011-10-20
Signature of officer | Date

THOMAS RENIER PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name JENNIFER MILLER	Preparer's signature JENNIFER MILLER	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶ RSM MCGLADREY INC				Firm's EIN ▶
Firm's address ▶ 700 MISSABE BUILDING DULUTH, MN 55802				Phone no ▶ (218) 727-8253

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE NORTHLAND FOUNDATION IS A RESOURCE FOR PEOPLE, BUSINESSES, AND COMMUNITIES IN NORTHEAST MINNESOTA WORKING TOWARD PROSPERITY THROUGH ECONOMIC AND SOCIAL JUSTICE OUR PURPOSE IS TO STRENGTHEN FAMILIES, GROW A SUSTAINABLE REGIONAL ECONOMY, CULTIVATE LEADERSHIP AND PHILANTHROPY, AND FOSTER RESPECT FOR ALL THROUGH OUR GRANTS TO NONPROFITS, LOANS TO LOCAL BUSINESSES, KIDS PLUS PROGRAM, AND OTHER SPECIAL INITIATIVES, THE NORTHLAND FOUNDATION IS BUILDING A STRONG FOUNDATION FOR THE FUTURE OF OUR REGION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 1,983,660 including grants of $ 1,551,822) (Revenue $)

THE GRANT PROGRAM PROVIDES FINANCIAL AND TECHNICAL RESOURCES TO TAX-EXEMPT NONPROFITS LOCATED IN AITKIN, CARLTON, COOK, ITASCA, KOOCHICHING, LAKE AND ST LOUIS COUNTIES THE THREE PRIORITY AREAS OF THE GRANT PROGRAM ARE 1) CONNECTING KIDS AND COMMUNITY/STRENGTHENING FAMILIES, 2) AGING WITH INDEPENDENCE, AND 3) OPPORTUNITIES FOR SELF-RELIANCE THESE FUNDING PRIORITIES WERE ESTABLISHED AS A RESULT OF NEEDS ASSESSMENTS AND BROAD PUBLIC INPUT, AND ARE CONTINUALLY REFINED AS ECONOMIC AND SOCIAL CONDITIONS CHANGE WITHIN THE REGION GRANT FUNDING FROM THE NORTHLAND FOUNDATION HAS ASSISTED INDIVIDUALS, FAMILIES, AND COMMUNITIES THROUGHOUT THE REGION TO GROW AND PROSPER

4b (Code) (Expenses $ 1,333,048 including grants of $) (Revenue $ 1,243,177)

SINCE 1986, "AGING WITH INDEPENDENCE" HAS BEEN A CORE NORTHLAND FOUNDATION PRIORITY WITH THE FULL SUPPORT OF ITS BOARD OF TRUSTEES, THE NORTHLAND FOUNDATION FORMALLY LAUNCHED NORTHLAND ASSISTED LIVING IN 2006 A 20-UNIT RESIDENTIAL STYLE COMMUNITY FOR OLDER ADULTS, "NORTHLAND VILLAGE - MCGREGOR'S ASSISTED LIVING COMMUNITY", OPENED IN APRIL 2007 IN FEBRUARY 2009, A SECOND 20-UNIT DEVELOPMENT OPENED IN BUHL AND A THIRD SITE HAS OPENED IN MAY 2011 IN HOYT LAKES THESE DEVELOPMENTS HAVE PROVIDED MUCH-NEEDED SENIOR HOUSING WITH SERVICES TO OLDER ADULTS IN UNDERSERVED, RURAL AREAS AND CREATED QUALITY EMPLOYMENT OPPORTUNITIES WITH BENEFITS NORTHLAND ALSO WORKS TO KEEP RESIDENTS' MONTHLY COSTS AT AN AFFORDABLE LEVEL WITHOUT COMPROMISING QUALITY WE DO NOT DISCRIMINATE BETWEEN PRIVATE PAY RESIDENTS AND THOSE WHO NEED FINANCIAL ASSISTANCE

4c (Code) (Expenses $ 809,381 including grants of $ 38,434) (Revenue $ 2,972)

SINCE 1988, THE NORTHLAND FOUNDATION'S BUSINESS FINANCE PROGRAM HAS OFFERED FLEXIBLE FINANCING TO PEOPLE STARTING NEW BUSINESSES OR EXPANDING EXISTING BUSINESSES IN THE NORTHEASTERN MINNESOTA COUNTIES OF AITKIN, CARLTON, COOK, ITASCA, KOOCHICHING, LAKE, ST LOUIS AND MORE RECENTLY, DOUGLAS COUNTY IN NORTHWESTERN WISCONSIN THE GOAL IS TO HELP RETAIN OR CREATE NEW, HIGH-QUALITY JOBS AND SUSTAIN THE ECONOMIC VITALITY OF THE REGION FINANCING TOOLS INCLUDE BUSINESS LOANS, ROYALTY INVESTMENTS, AND LOAN GUARANTEES RECIPIENTS MAY BE FOR-PROFIT OR NONPROFIT ENTITIES THAT MEET CERTAIN FINANCIAL AND SOCIAL GUIDELINES

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 727,833 including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 4,853,922

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	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*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		No
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, XII, and XIII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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, Parts I and IV*	14b		No
15	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 U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	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 U S ? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	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 (see instructions)*	17		No
18	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		No
19	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*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	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*	21	Yes	
22	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*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
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–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
25a	**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		No
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		No
26	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		No
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*	27		No
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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	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* ☐ **Yes** ☑ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	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*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a 30			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes	
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 100			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," 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)?		4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		No
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		No
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 required to file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		No
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 and section 509(a)(3) supporting organizations.** Did the 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.**				
a	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				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O		13a		
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 13			
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 relationship with any other officer, director, trustee, or key employee?		2		No
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 person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
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		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation 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		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ MN , WI

18 Section 6104 requires an organization to make its Form 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 ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

HEATHER BROUSE
202 WEST SUPERIOR STREET 610
DULUTH, MN 55802
(218) 723-4040

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

Check if Schedule O contains a response to any question 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, and **current** key employees 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

☐ 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 week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CINDY HANSEN CHAIR	2 00	X		X				0	0	0
(2) KENNETH JOHNSON VICE CHAIR	2 00	X		X				0	0	0
(3) NANCY NORR TRUSTEE	2 00	X						0	0	0
(4) DAVID CLUSIAU SECRETARY/TREASURER	2 00	X		X				0	0	0
(5) JEFF COREY TRUSTEE	2 00	X						0	0	0
(6) MARIETA JOHNSON TRUSTEE	2 00	X						0	0	0
(7) CLAUDIA OTOS TRUSTEE	2 00	X						0	0	0
(8) DIANE RAUSCHENFELS TRUSTEE	2 00	X						0	0	0
(9) CHUCK WALT TRUSTEE	2 00	X						0	0	0
(10) ED ZABINSKI TRUSTEE	2 00	X						0	0	0
(11) STEVE DOWNING TRUSTEE	2 00	X						0	0	0
(12) LYNN GOERDT TRUSTEE	2 00	X						0	0	0
(13) NEVADA LITTLEWOLF TRUSTEE	2 00	X						0	0	0
(14) THOMAS RENIER PRESIDENT	55 00			X				173,959	0	36,880
(15) LYNN HAGLIN VICE PRESIDENT	50 00			X				128,573	0	27,636
(16) HEATHER BROUSE CFO	50 00			X				82,030	0	15,527

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(17) SCOTT MARTIN PRESIDENT NORTHLAND INSTIT	40 00					X		142,009	0	8,815
(18) JOHN ELDEN DIRECTOR OF BUSINESS FINANCE	40 00					X		99,755	0	25,516
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								526,571	0	88,858

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶3

		Yes	**No**
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
MESABI BITUMINOUS 4988 ENTERPRISE DR GILBERT, MN 55741	FOUNDATION PREPARATION FOR NEW ASSISTED	124,857

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶1

Part VIII Statement of Revenue

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations . . .	1d					
	e	Government grants (contributions)	1e	757,271				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,185,639				
	g	Noncash contributions included in lines 1a-1f $		30,281				
	h	**Total.** Add lines 1a-1f . . . . ▶			3,942,910			
Program Service Revenue				Business Code				
	2a	ASSISTED LIVING INITIA		623000	1,243,177	1,243,177		
	b	LOAN PROGRAM INCOME		525990	2,972	2,972		
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f . . . . ▶			1,246,149			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶			2,345,366			2,345,366
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties . . . . ▶						
			(i) Real	(ii) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . ▶						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	23,552,152	550				
	b	Less cost or other basis and sales expenses	21,676,626	1,411				
	c	Gain or (loss)	1,875,526	-861				
	d	Net gain or (loss) . . . . ▶			1,874,665			1,874,665
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from fundraising events . . ▶						
	9a	Gross income from gaming activities See Part IV, line 19 .	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . . . ▶						
	10a	Gross sales of inventory, less returns and allowances .	a					
	b	Less cost of goods sold . .	b					
	c	Net income or (loss) from sales of inventory . . ▶						
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . . . ▶						
	12	**Total revenue.** See Instructions . . . ▶			9,409,090	1,246,149	0	4,220,031

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) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 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	1,590,256	1,590,256		
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	464,605	308,261	114,176	42,168
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	1,626,402	1,394,182	194,688	37,532
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	86,516	72,271	11,778	2,467
9	Other employee benefits	207,610	160,494	38,177	8,939
10	Payroll taxes	144,664	116,460	23,268	4,936
a	Fees for services (non-employees) Management				
b	Legal	6,423	5,108	1,056	259
c	Accounting	54,192	13,400	40,792	
d	Lobbying				
e	Professional fundraising services *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	464,874	425,899	5,032	33,943
12	Advertising and promotion	54,735	6,113	38,093	10,529
13	Office expenses	238,547	149,826	81,891	6,830
14	Information technology				
15	Royalties . .				
16	Occupancy	82,454		82,454	
17	Travel	114,593	59,482	51,164	3,947
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	96,612	90,936	2,455	3,221
20	Interest	304,582	300,214	4,368	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	216,791	142,894	73,580	317
23	Insurance	81,898	52,209	28,951	738
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	PROVISION FOR LOAN LOSS	84,828	84,828		
b	UTILITIES	64,144		64,144	
c	PROPERTY TAXES	42,514		42,514	
d	EVALUATION	25,228	18,937	3,145	3,146
e	REPAIRS AND MAINTENANCE	20,791		20,791	
f	All other expenses	-132,778	-137,848	3,895	1,175
25	**Total functional expenses.** Add lines 1 through 24f	5,940,481	4,853,922	926,412	160,147
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	8,420,675	2	9,726,983
	3	Pledges and grants receivable, net	1,001,727	3	1,249,677
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L		6	
	7	Notes and loans receivable, net	9,557,215	7	9,740,250
	8	Inventories for sale or use	8,034	8	
	9	Prepaid expenses and deferred charges	60,626	9	60,372
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 6,904,116			
	b	Less accumulated depreciation — 10b: 869,738	3,690,401	10c	6,034,378
	11	Investments—publicly traded securities	33,467,561	11	40,397,955
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	93,809	15	96,602
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	56,300,048	16	67,306,217
Liabilities	17	Accounts payable and accrued expenses	494,358	17	1,236,587
	18	Grants payable	222,825	18	275,884
	19	Deferred revenue	906,000	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties	9,389,757	23	10,706,158
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	28,432	25	0
	26	**Total liabilities.** Add lines 17 through 25	11,041,372	26	12,218,629
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	43,441,549	27	53,269,077
	28	Temporarily restricted net assets	1,817,127	28	1,818,511
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	45,258,676	33	55,087,588
	34	Total liabilities and net assets/fund balances	56,300,048	34	67,306,217

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	9,409,090
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,940,481
3	Revenue less expenses Subtract line 2 from line 1	3	3,468,609
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	45,258,676
5	Other changes in net assets or fund balances (explain in Schedule O)	5	6,360,303
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	55,087,588

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☑

			Yes	No
1	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			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	2c	Yes	
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 separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated 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?	3a		No
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		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number

41-1554455

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

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 benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col (i) listed in your governing document? Yes	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	No	**(vii)** Amount of support
Total									

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,643,722	2,158,619	1,899,895	2,816,785	3,942,910	13,461,931
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	2,643,722	2,158,619	1,899,895	2,816,785	3,942,910	13,461,931
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,376,972
6 **Public Support.** Subtract line 5 from line 4						7,084,959

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	2,643,722	2,158,619	1,899,895	2,816,785	3,942,910	13,461,931
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,287,618	2,219,101	1,921,775	2,364,921	2,345,366	11,138,781
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						24,600,712

12 Gross receipts from related activities, etc (See instructions) | 12 | 3,428,660

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) | 14 | 28 800 %

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | 15 | 18 050 %

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☑

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test
THE NORTHLAND FOUNDATION IS A PUBLICLY-SUPPORTED ORGANIZATION THAT HAS AN ONGOING PROGRAM FOR THE SOLICITATION OF FUNDS TO SUPPORT ITS PRIORITY AREAS AND INITIATIVES. ANNUALLY FUNDS ARE REQUESTED AND RECEIVED FROM INDIVIDUALS, LOCAL BUSINESSES, CIVIC ORGANIZATIONS, GOVERNMENTAL ENTITIES, AND OTHER PUBLIC CHARITIES. THE NORTHLAND FOUNDATION IS GOVERNED BY A BOARD OF TRUSTEES REPRESENTING A BROAD CROSS-SECTION OF GEOGRAPHY, INTEREST, AND KNOWLEDGE OF THE PEOPLE AND COMMUNITIES OF NORTHEASTERN MINNESOTA. THROUGH THE GRANT PROGRAM, BUSINESS FINANCE PROGRAM, KIDS PLUS PROGRAM, NORTHLAND ASSISTED LIVING, AND OTHER SPECIAL INITIATIVES, THE NORTHLAND FOUNDATION PROVIDES AN ARRAY OF SERVICES AVAILABLE FOR THE GENERAL PUBLIC. THESE SERVICES INCLUDE GRANTS, BUSINESS LOANS, COMMUNITY-BASED PROGRAMMING, TRAINING, AND ASSISTED LIVING HOUSING FOR THE ELDERLY.THE NORTHLAND FOUNDATION HAS A TEAM OF STAFF MEMBERS WORKING ON FUND DEVELOPMENT EFFORTS INCLUDING THE PRESIDENT, VICE PRESIDENT/KIDS PLUS DIRECTOR, DIRECTOR OF BUSINESS FINANCE AND DIRECTOR OF SPECIAL PROJECTS. ADDITIONAL SUPPORT IS PROVIDED BY THE DIRECTOR OF COMMUNICATIONS, TWO PROGRAM ASSOCIATES, AND AN ADMINISTRATIVE ASSISTANT. EACH STAFF MEMBER SERVES IN A VARIETY OF ROLES FROM RELATIONSHIP-BUILDING, TO SCANNING FOR NEW FUNDING OPPORTUNITIES, TO DEVELOPING NEW PROGRAM CONCEPTS, TO MEETING WITH PROSPECT FUNDERS, TO PARTICIPATING IN SITE VISITS WITH PROSPECTIVE FUNDERS. THE DIRECTOR OF SPECIAL PROJECTS SERVES IN THE CAPACITY OF A FULL-TIME GRANT-WRITER. DURING FY 2010-11, WE SUBMITTED 67 GRANT PROPOSALS/LETTERS OF REQUEST AND RECEIVED 53 FUNDING AWARDS FROM A BROAD ARRAY OF SOURCES INCLUDING FOUNDATIONS, CORPORATE GIVING PROGRAMS, STATE GOVERNMENT, FEDERAL GOVERNMENT, BUSINESSES, SERVICES ORGANIZATIONS, AND INDIVIDUALS. WE CONSTANTLY SEEK WAYS TO DIVERSIFY OUR DEVELOPMENT EFFORTS INCLUDING INDIVIDUAL GIVING, MAJOR GIFTS, AND PLANNED GIVING. THE NORTHLAND FOUNDATION IS NOT A MEMBERSHIP ORGANIZATION THAT SOLICITS DUES.
THE NORTHLAND FOUNDATION IS A PUBLICLY-SUPPORTED ORGANIZATION THAT HAS AN ONGOING PROGRAM FOR THE SOLICITATION OF FUNDS TO SUPPORT ITS PRIORITY AREAS AND INITIATIVES. ANNUALLY FUNDS ARE REQUESTED AND RECEIVED FROM INDIVIDUALS, LOCAL BUSINESSES, CIVIC ORGANIZATIONS, GOVERNMENTAL ENTITIES, AND OTHER PUBLIC CHARITIES. THE NORTHLAND FOUNDATION IS GOVERNED BY A BOARD OF TRUSTEES REPRESENTING A BROAD CROSS-SECTION OF GEOGRAPHY, INTEREST, AND KNOWLEDGE OF THE PEOPLE AND COMMUNITIES OF NORTHEASTERN MINNESOTA. THROUGH THE GRANT PROGRAM, BUSINESS FINANCE PROGRAM, KIDS PLUS PROGRAM, NORTHLAND ASSISTED LIVING, AND OTHER SPECIAL INITIATIVES, THE NORTHLAND FOUNDATION PROVIDES AN ARRAY OF SERVICES AVAILABLE FOR THE GENERAL PUBLIC. THESE SERVICES INCLUDE GRANTS, BUSINESS LOANS, COMMUNITY-BASED PROGRAMMING, TRAINING, AND ASSISTED LIVING HOUSING FOR THE ELDERLY.THE NORTHLAND FOUNDATION HAS A TEAM OF STAFF MEMBERS WORKING ON FUND DEVELOPMENT EFFORTS INCLUDING THE PRESIDENT, VICE PRESIDENT/KIDS PLUS DIRECTOR, DIRECTOR OF BUSINESS FINANCE AND DIRECTOR OF SPECIAL PROJECTS. ADDITIONAL SUPPORT IS PROVIDED BY THE DIRECTOR OF COMMUNICATIONS, TWO PROGRAM ASSOCIATES, AND AN ADMINISTRATIVE ASSISTANT. EACH STAFF MEMBER SERVES IN A VARIETY OF ROLES FROM RELATIONSHIP-BUILDING, TO SCANNING FOR NEW FUNDING OPPORTUNITIES, TO DEVELOPING NEW PROGRAM CONCEPTS, TO MEETING WITH PROSPECT FUNDERS, TO PARTICIPATING IN SITE VISITS WITH PROSPECTIVE FUNDERS. THE DIRECTOR OF SPECIAL PROJECTS SERVES IN THE CAPACITY OF A FULL-TIME GRANT-WRITER. DURING FY 2010-11, WE SUBMITTED 67 GRANT PROPOSALS/LETTERS OF REQUEST AND RECEIVED 53 FUNDING AWARDS FROM A BROAD ARRAY OF SOURCES INCLUDING FOUNDATIONS, CORPORATE GIVING PROGRAMS, STATE GOVERNMENT, FEDERAL GOVERNMENT, BUSINESSES, SERVICES ORGANIZATIONS, AND INDIVIDUALS. WE CONSTANTLY SEEK WAYS TO DIVERSIFY OUR DEVELOPMENT EFFORTS INCLUDING INDIVIDUAL GIVING, MAJOR GIFTS, AND PLANNED GIVING. THE NORTHLAND FOUNDATION IS NOT A MEMBERSHIP ORGANIZATION THAT SOLICITS DUES.

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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number
41-1554455

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
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 writing that the assets held in donor advised 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 advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 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, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	34,691,229	32,272,823	35,335,984		
b Contributions					
c Investment earnings or losses	10,257,604	3,821,733	-1,816,854		
d Grants or scholarships					
e Other expenditures for facilities and programs	998,639	1,403,327	1,246,307		
f Administrative expenses					
g End of year balance	43,950,194	34,691,229	32,272,823		

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 100 000 %

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI **Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		317,601		317,601
b Buildings		4,925,551	360,457	4,565,094
c Leasehold improvements		35,914	30,658	5,256
d Equipment		745,369	403,689	341,680
e Other		879,681	74,934	804,747
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				6,034,378

Part VII Investments—Other Securities. See Form 990, 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 value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) 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 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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 on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses 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	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	NORTHLAND FOUNDATION AND SUBSIDIARIES HAVE BEEN GRANTED TAX-EXEMPT STATUS UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND A SIMILAR SECTION OF THE STATE CODE THE FINANCIAL ACCOUNTING STANDARDS BOARD ISSUED GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THE GUIDANCE

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number
41-1554455

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 70

3 Enter total number of other organizations . . . ▶ 2

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ORGANIZATIONS ARE REQUIRED TO SUBMIT INTERIM AND FINAL REPORTS DETAILING PROGRAM ACCOMPLISHMENTS AND USE OF GRANT FUNDS ORGANIZATIONS ITEMIZE ACTUAL EXPENDITURES COMPARED TO THE BUDGET THEY SUBMITTED WITH THEIR GRANT APPLICATION ORGANIZATIONS REPORT ON HOW NORTHLAND FOUNDATION FUNDS WERE SPENT AS WELL AS ADDITIONAL FUNDS PROVIDED BY THE GRANTEE AND OTHER SOURCES ORGANIZATIONS REPORT ON SOURCES OF FUNDING FOR THE PROJECT BOTH AS PROJECTED IN THE GRANT APPLICATION AND THE ACTUAL RECEIPTS OVER THE COURSE OF THE GRANT PERIOD ORGANIZATIONS RECEIVING GRANTS $5,000 AND UNDER SUBMIT A FINAL REPORT ORGANIZATIONS RECEIVING GRANTS OVER $5,000 SUBMIT INTERIM REPORTS EVERY 6 MONTHS IN ADDITION TO A FINAL REPORT BOTH THE GRANTS MANAGER AND THE GRANTS COORDINATOR REVIEW THESE REPORTS AS THEY COME IN

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 41-1554455
Name: NORTHLAND FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITTLE TREASURES CENTER INC5016 HERMANTOWN ROAD DULUTH, MN 55811	41-1942142	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
DAMIANO OF DULUTH INC 206 W 4TH ST 209 DULUTH, MN 55806	41-1453521	501(C)(3)	30,000				SUPPORT FOR HUNGER ALLEVIATION PROGRAMMING IN DULUTH
SOAR CAREER SOLUTIONS 205 W 2ND ST 101 DULUTH, MN 55802	41-1449179	501(C)(3)	20,000				IN SUPPORT OF PROGRAMMING TO HELP PEOPLE WITH BARRIERS TO EMPLOYMENT OBTAIN AND MAINTAIN EMPLOYMENT
ARROWHEAD ECONOMIC OPPORTUNITY AGENCY 702 3RD AVENUE SOUTH VIRGINIA, MN 55792	41-6052144	501(C)(3)	20,000				TO PROVIDE TRANSPORTATION ASSISTANCE TO LOW-INCOME PEOPLE IN RURAL COMMUNITIES
CENTER CITY HOUSING CORPORATION105 1/2 WEST 1ST ST DULUTH, MN 55802	36-3485584	501(C)(3)	25,000				TO PROVIDE SERVICES TO SUPPORT HOMELESS FAMILIES
COMMUNITY ACTION DULUTH19 N 21ST AVENUE WEST DULUTH, MN 55806	41-1410670	501(C)(3)	25,000				IN SUPPORT FO PROGRAMMING TO EMPOWER LOW-INCOME PEOPLE TO UNDERSTAND ISSUES OF POVERTY AND WORK TO OVERCOME THE BARRIERS TO PROSPERITY
ITASCA COUNTY HABITAT FOR HUMANITY1338 EAST HWY 169 GRAND RAPIDS, MN 55744	41-1732842	501(C)(3)	13,000				IN SUPPORT OF THE CREATION OF AFFORDABLE HOUSING IN ITASCA COUNTY
ELDERCIRCLE1105 NW 4TH ST GRAND RAPIDS, MN 55744	41-1994691	501(C)(3)	15,000				TO PROVIDE PROGRAMMING TO HELP OLDER ADULTS LIVE INDEPENDENTLY AS LONG AS POSSIBLE
SALVATION ARMY2445 PRIOR AVE N ROSEVILLE, MN 55113	41-0698597	501(C)(3)	20,000				OPERATING SUPPORT FOR THE SALVATION ARMY'S FOOD SHELF, SOUP KITCHEN AND MEDICAL FOOD SHELF
UDAC INC500 EAST 10TH STREET DULUTH, MN 55805	41-0856115	501(C)(3)	12,000				SUPPORT FOR PROGRAMS THAT HELP PEOPLE WITH DISABILITIES INTEGRATE MORE FULLY INTO SOCIETY
CHOICE UNLIMITED1829 E SUPERIOR ST DULUTH, MN 55812	41-1425218	501(C)(3)	16,803				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
GRAND RAPIDS AREA COMMUNITY FOUNDATION350 NW FIRST AVE SUITE E GRAND RAPIDS, MN 55744	41-1761590	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COMMON GROUND DECONSTRUCTION206 W 4TH ST STE 202 DULUTH,MN 55806	20-0986222	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
COMMUNITY ACTION DULUTH19 N 21ST AVENUE WEST DULUTH,MN 55806	41-1410670	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
LUTHERAN SOCIAL SERVICE OF MN424 W SUPERIOR ST 204 ORDEAN BLDG DULUTH,MN 55802	41-0872993	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
MN ASSISTANCE COUNCIL FOR VETERANS360 ROBERT STREET NORTH SUITE 306 ST PAUL,MN 55101	41-1694717	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
MN CITIZENS FEDERATION - NORTHEAST2110 W FIRST ST 102 DULUTH,MN 55806	41-1253514	501(C)(3)	9,618				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
MINNESOTA DIVERSIFIED INDUSTRIES825 LILY LAND GRAND RAPIDS,MN 55744	41-1801498	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
NORTHEAST ENTREPRENEUR FUND8355 UNITY DRIVE SUITE 100 VIRGINIA,MN 55792	36-3566632	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
NORTHERN COMMUNITIES LAND TRUST206 W 4TH ST STE 201 DULUTH,MN 55806	41-1678328	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
SOAR CAREER SOLUTIONS 205 W 2ND ST 101 DULUTH,MN 55802	41-1449179	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
NORTHSPAN GROUP INC 221 W 1ST ST DULUTH,MN 55802	36-3386158	501(C)(4)	5,000				IN SUPPORT OF THE NORTHLAND CONNECTION PROGRAM, WHICH PROVIDES ECONOMIC DEVELOPMENT DATA AND ANALYSIS TO RECRUIT, EXPAND AND RETAIN BUSINESSES, AND CREATE NEW JOBS IN OUR REGION
WTIP NORTH SHORE RADIO 1712 W HIGHWAY 61 GRAND MARAIS,MN 55604	41-1754979	501(C)(3)	10,000				SUPPORT FOR THE CREATION OF A PROGRAM TO ENGAGE AREA YOUTH IN COMMUNITY ISSUES THROUGH RADIO
CARLTON COUNTY CHILDREN & FAMILY SERVICES COLLABORATIVE30 10TH ST CLOQUET,MN 55720	41-6005767	501(C)(3)	5,000				TO ESTABLISH A NEW EARLY CHILDHOOD DATA TRACKING AND COLLECTION SYSTEM TO ENHANCE PRESCHOOL EDUCATION AND KINDERGARTEN READINESS IN CARLTON COUNTY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITTLE TREASURES CENTER INC5016 HERMANTOWN ROAD DULUTH,MN 55811	41-1942142	501(C)(3)	5,000				GENERAL OPERATING SUPPORT FOR THE INFANT AND TODDLER PROGRAMS OF THE LITTLE TREASURES CENTER, INC
SECOND HARVEST NORTH CENTRAL FOOD BANK2222 CROMWELL DRIVE GRAND RAPIDS,MN 55744	41-1782776	501(C)(3)	5,000				TO SUPPORT KIDS PACKS TO GO, A SUPPLEMENTAL NUTRITION PROGRAM FOR LOW INCOME SCHOOL CHILDREN IN AITKIN AND ITASCA COUNTIES
NORTHERN COMMUNITIES LAND TRUST206 W 4TH ST STE 201 DULUTH,MN 55806	41-1678328	501(C)(3)	50,000				TO PROVIDE SUPPORTIVE SERVICES TO NCLT HOMEOWNERS
CHUM102 W 2ND ST DULUTH,MN 55802	41-1227969	501(C)(3)	5,000				SUPPORT FOR SERVICE PROJECTS TO ASSIST CHUM PROGRAMS AND THE PEOPLE THEY SERVE
CITY OF DULUTH ATTORNEY'S OFFICE411 WEST FIRST STREET DULUTH,MN 55802	41-6005105	115	5,000				SUPPORT FOR A VISTA PLACEMENT WITH THE CITY OF DULUTH ATTORNEY'S OFFICE TO FOCUS ON PROSECUTION OF DOMESTIC VIOLENCE CASES
A CHANCE TO GROW INC 1800 SECOND STREET NE MINNEAPOLIS,MN 55418	41-1444113	501(C)(3)	8,000				SUPPORT FOR FURTHER IMPLEMENTION OF THE S M A R T PROGRAM TO HELP ACCELERATE CHILD DEVELOPMENT AND LEARNING IN SCHOOLS IN DULUTH, HERMANTOWN, EVELETH AND IRON
UNITED WAY OF GREATER DULUTH424 WEST SUPERIOR ST SUITE 402 DULUTH,MN 55802	41-0857077	501(C)(3)	10,000				SUPPORT FOR PROGRAMMING TO PROMOTE EARLY LITERACY FOR CHILDREN FROM BIRTH TO AGE FIVE IN SOUTHERN ST LOUIS, LAKE AND COOK COUNTIES
VOLUNTEER SERVICES OF CARLTON COUNTY1219 14TH STREET SUITE D CLOQUET,MN 55720	41-1598604	501(C)(3)	25,000				SUPPORT FOR THE DEVELOPMENT OF A NEW PROGRAM TO PROVIDE A VARIETY OF SERVICES TO OLDER ADULTS TO HELP THEM TO LIVE INDEPENDENTLY
COMMUNITY ACTION DULUTH19 N 21ST AVENUE WEST DULUTH,MN 55806	41-1410670	501(C)(3)	20,000				TO ASSIST LOW-INCOME FAMILIES IN PURCHASING RELIABILE AND EFFICIENT CARS
DULUTH AVIATION INSTITUTE5000 MINNESOTA AVENUE HANGAR 10 SKY HARBOR AIRPORT DULUTH,MN 55802	36-4627726	501(C)(3)	5,000				SUPPORT FOR THE DEVELOPMENT OF STEM CURRICULUM AROUND AVIATION FOR 6TH GRADE STUDENTS IN THE DULUTH SCHOOL DISTRICT
COMMUNITY PARTNERS - TWO HARBORS505 1ST AVENUE TWO HARBORS,MN 55616	41-1963127	501(C)(3)	6,328				TO PROVIDE SUPPORT FOR FAMILY CAREGIVERS OF OLDER ADULTS WITH MEMORY LOSS
LITTLE TREASURES CENTER INC5016 HERMANTOWN ROAD DULUTH,MN 55811	41-1942142	501(C)(3)	45,000				IN SUPPORT OF NEW PROGRAMMING AND RELOCATION OF THE LITTLE TREASURES TO THE LAKESHORE FACILITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DULUTH CHILDREN'S MUSEUM506 W MICHIGAN ST 5 DULUTH, MN 55802	41-0718361	501(C)(3)	5,000				IN SUPPORT OF PROGRAMMING TO BRING MUSEUM EXHIBITS AND APPROPRIATE CURRICULUM INTO THE SCHOOLS
NEIGHBORHOOD HOUSING SERVICES OF DULUTH224 EAST 4TH STREET DULUTH, MN 55805	41-0718361	501(C)(3)	15,000				IN SUPPORT OF EFFORTS TO INCREASE HOME OWNERSHIP AND TO IMPROVE THE QUALITY OF HOUSING STOCK ACROSS DULUTH
CENTER CITY HOUSING CORPORATION105 1/2 WEST 1ST ST DULUTH, MN 55802	36-3485584	501(C)(3)	5,000				SUPPORT FOR PLANNING AND STAFF TRAINING TO DEVELOP PROGRAMMING FOR CHILDREN IN TRANSITIONAL HOUSING
MN COUNCIL OF NONPROFITS2314 UNIVERSITY AVE 20 ST PAUL, MN 55114	36-3501477	501(C)(3)	5,000				IN SUPPORT OF TRAINING FOR NONPROFIT LEADERS TO DEVELOP THEIR PERFORMANCE MANAGEMENT SKILLS
NORTHEAST ENTREPRENEUR FUND8355 UNITY DRIVE SUITE 100 VIRGINIA, MN 55729	36-3566632	501(C)(3)	5,000				TO ASSIST LOCAL ARTISTS IN THEIR EFFORTS TO SELL THEIR WORK TO AREA RETAILERS AND RESORTS
LOCAL INITIATIVES SUPPORT CORPORATION 202 WEST SUPERIOR STREET 401 SELLWOOD BUILDING DULUTH, MN 55802	13-3030229	501(C)(3)	25,000				IN SUPPORT OF COMMUNITY DEVELOPMENT EFFORTS TO REVITALIZE DISTRESSED NEIGHBORHOODS
PLANNED PARENTHOOD OF MINNESOTA1200 LAGOON AVE SOUTH MINNEAPOLIS, MN 55408	41-0948382	501(C)(3)	10,000				IN SUPPORT OF EFFORTS TO REDUCE THE RATES OF TEEN PREGNANCY AND SEXUALLY TRANSMITTED DISEASES
GRANT COMMUNITY SCHOOL COLLABORATIVE 1027 NORTH 8TH AVE E DULUTH, MN 55805	41-2002724	501(C)(3)	35,000				IN SUPPORT OF PROGRAMMING TO MEET THE ACADEMIC AND CULTURAL NEEDS OF AT-RISK STUDENTS ATTENDING NETTLETON SCHOOL
VOLUNTEERS IN EDUCATIONPO BOX 65 SOUDAN, MN 55782	45-0578555	501(C)(3)	20,000				IN SUPPORT OF VOLUNTEERING TUTORING PROGRAMS IN NORTHERN ST LOUIS COUNTY SCHOOLS
CHAMPION LIFE MINISTRIES INCPO BOX 16656 DULUTH, MN 55816	26-2704606	501(C)(3)	8,672				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
LAKE SUPERIOR SCHOOL DISTRICT #3811640 HIGHWAY 2 TWO HARBORS, MN 55616	41-6001896	115	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
LOCAL INITIATIVES SUPPORT CORPORATION 202 WEST SUPERIOR STREET 401 SELLWOOD BUILDING DULUTH, MN 55802	13-3030229	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINSHIP OF AITKIN COUNTY208 2ND AVENUE NW AITKIN,MN 56431	41-1682641	501(C)(3)	10,000				IN SUPPORT OF YOUTH DEVELOPMENT PROGRAMS SERVING CHILDREN IN AITKIN COUNTY
HARTLEY NATURE CENTER 3001 WOODLAND AVENUE DULUTH,MN 55803	36-3507636	501(C)(3)	10,000				TO EXPAND PROGRAMMING FOR YOUTH AGES 9 - 15 BEYOND HARTLEY PARK
CARLTON COUNTY CHILDREN & FAMILY SERVICES COLLABORATIVE30 10TH ST CLOQUET,MN 55720	41-6005767	501(C)(3)	20,000				IN SUPPORT OF EFFORTS TO INCREASE THE NUMBER OF CHILDREN READY FOR KINDERGARTEN
LIFE HOUSE INC102 W 1ST ST DULUTH,MN 55802	41-1704840	501(C)(3)	20,000				IN SUPPORT OF SERVICES TO YOUTH WHO ARE HOMELESS OR AT-RISK OF HOMELESSNESS
ITASCA COUNTY FAMILY YMCA400 RIVER ROAD GRAND RAPIDS,MN 55744	41-1358634	501(C)(3)	12,000				IN SUPPORT OF PROGRAMMING FOR OLDER ADULTS AND YOUTH AT THE ITASCA COUNTY FAMILY YMCA
THE WHITE HOUSE PROJECT12 METRO TECH CENTER 26TH FLOOR BROOKLYN,NY 11201	52-2172075	501(C)(3)	10,000				SUPPORT FOR BUILDING THE LEADERSHIP NETWORK FOR AMERICAN INDIAN WOMEN IN NORTHEAST MINNESOTA
ADVOCATES FOR FAMILY PEACE1611 NW FOURTH STREET GRAND RAPIDS,MN 55744	41-1377489	501(C)(3)	19,523				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
AITKIN COUNTY HABITAT FOR HUMANITYPO BOX 281 AITKIN,MN 56431	41-1756186	501(C)(3)	5,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
ARROWHEAD ECONOMIC OPPORTUNITY AGENCY702 3RD AVENUE SOUTH VIRGINIA,MN 55792	41-6052144	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
BOYS & GIRLS CLUB OF LEECH LAKE AREA208 CENTRAL AVE CASS LAKE,MN 56633	41-1929446	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
BOYS & GIRLS CLUB OF THE NORTHLANDPO BOX 16435 DULUTH,MN 55816	41-0969947	501(C)(3)	19,956				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
CARLTON COUNTY CHILDREN & FAMILY SERVICES COLLABORATIVE30 10TH ST CLOQUET,MN 55720	41-6005767	501(C)(3)	11,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAMIANO OF DULUTH INC 206 W 4TH ST 209 DULUTH,MN 55806	41-1453521	501(C)(3)	17,905				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
DULUTH AREA FAMILY YMCA302 WEST 1ST ST DULUTH,MN 55802	41-0693931	501(C)(3)	19,819				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
ITASCA COUNTY FAMILY YMCA1338 EAST HWY 169 GRAND RAPIDS,MN 55744	41-1732842	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
KOOTASCA COMMUNITY ACTION INC2232 2ND AVENUE EAST INTERNATIONAL FALLS, MN 56649	41-0904805	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
LIFE HOUSE INC102 W 1ST ST DULUTH,MN 55802	41-1704840	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
LINCOLN PARK FAMILY & CHILDREN'S COLLAB1701 NORTH 9TH AVENUE VIRGINIA,MN 55792	27-4990487	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
MCGREGOR KIDS PLUS 42555 110TH AVENUE TAMARACK,MN 55787	41-1941630	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
NEIGHBORHOOD HOUSING SERVICES OF DULUTH224 EAST 4TH STREET DULUTH,MN 55805	41-1465688	501(C)(3)	9,990				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
RANGE WOMEN'S ADVOCATES301 1ST ST SOUTH SUITE 100 VIRGINIA,MN 55792	41-1369020	501(C)(3)	10,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
SAFE HAVEN SHELTER FOR BATTERED WOMENPO BOX 3558 DULUTH,MN 55803	41-1317462	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
WELL BEING DEVELOPMENT102 E SHERIDAN STREET ELY,MN 55731	27-2987032	501(C)(3)	5,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS
COOK COUNTY HIGHER EDUCATION300 W 3RD STREET PO BOX 57 GRAND MARAIS,MN 55604	41-1920590	115	20,000				SUPPORT FOR OUT OF SCHOOL TIME INTERGENERATIONAL PROGRAMMING FOR YOUTH IN GRAND MARAIS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDERSON CENTER163 TOWER VIEW DRIVE RED WING,MN 55066	41-1911774	501(C)(3)	10,000				TO PROVIDE MANAGEMENT AND BUSINESS DEVELOPMENT EDUCATION FOR BUSINESS LEADERS IN NE MINNESOTA
SCOTTISH RITE FOUNDATION28 WEST 2ND STREET DULUTH,MN 55802	41-1420162	501(C)(3)	19,500				SUPPORT FOR THE TREATMENT OF YOUTH EXPERIENCING LANGUAGE DISORDERS
UNION GOSPEL MISSION 219 EAST FIRST STREET DULUTH,MN 55802	41-0724066	501(C)(3)	5,000				SUPPORT FOR THE FREE HOT MEAL PROGRAM IN 2011
KOOCHICHING AGING OPTIONS1000 5TH STREET INTERNATIONAL FALLS, MN 56649	26-4636084	501(C)(3)	20,000				SUPPORT FOR SERVICES TO HELP OLDER ADULTS AGE IN PLACE IN KOOCHICHING COUNTY
PAVSA32 E 1ST STREET SUITE 200 DULUTH,MN 55802	41-1350021	501(C)(3)	60,000				TO PROVIDE SERVICES AND SUPPORT SYSTEMS CHANGE FOR VICTIMS OF TRAFFICKING
FIRST200 BEDFORD STREET MANCHESTER,NH 03101	22-2990908	501(C)(3)	5,000				IN SUPPORT OF THE INAUGURAL LAKE SUPERIOR REGIONAL - 2011 FIRST "FOR THE INSPIRATION AND RECOGNITION OF SCIENCE AND TECHNOLOGY" ROBOTICS COMPETITION HELD IN DULUTH ON MARCH 10TH, TARGETED AT STUDENTS IN GRADES 9-12
APEX306 WEST SUPERIOR ST STE 902 DULUTH,MN 55802	32-0079166	501(C)(6)	15,000				TO SUPPORT ECONOMIC DEVELOPMENT EFFORTS IN DULUTH AND THE SURROUNDING AREA
RANGE WOMEN'S ADVOCATES301 1ST ST SOUTH SUITE 100 VIRGINIA,MN 55792	41-1369020	501(C)(3)	20,000				SUPPORT FOR AN INTERIM EXECUTIVE DIRECTOR POSITION
DOMESTIC ABUSE INTERVENTION PROGRAMS202 EAST SUPERIOR STREET DULUTH,MN 55802	41-1382134	501(C)(3)	16,100				SUPPORT TO INCREASE COOPERATION AND COMMUNICATION BETWEEN THE VISITATION CENTER AND THE COURT SYSTEM
YWCA OF DULUTH32 EAST 1ST ST DULUTH,MN 55802	41-0696493	501(C)(3)	20,000				SUPPORT FOR THE CONSOLIDATION OF THE YWCA'S EARLY CHILDHOOD EDUCATION CENTERS
MN CITIZENS FEDERATION - NORTHEAST2110 W FIRST ST 102 DULUTH,MN 55806	41-1253514	501(C)(3)	5,000				SUPPORT FOR EDUCATIONAL OUTREACH TO OLDER ADULTS REGARDING THE AFFORDABLE CARE ACT
CLIMB THEATRE6415 CARMEN AVE E INVER GROVE HEIGHTS, MN 55076	51-0189494	501(C)(3)	11,431				SUPPORT FOR PROGRAMMING TO FOSTER INTERGENERATIONAL DIALOGUE THROUGH THEATRE IN 3 RURAL COMMUNITIES (TWO HARBORS, SILVER BAY, AND ELY) IN NORTHEASTERN MINNESOTA

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHSPAN GROUP INC 221 W 1ST ST DULUTH, MN 55802	36-3386158	501(C)(4)	5,000				IN SUPPORT OF THE NORTHLAND CONNECTION PROGRAM, WHICH PROVIDES ECONOMIC DEVELOPMENT DATA AND ANALYSIS TO RECRUIT, EXPAND AND RETAIN BUSINESSES, AND CREATE NEW JOBS IN OUR REGION
KIDS CLOSET OF DULUTH 2308 WEST 3RD STREET DULUTH, MN 55806	20-1878745	501(C)(3)	5,000				SUPPORT TO PURCHASE CLOTHING FOR CHILDREN IN NEED
COPELAND VALLEY YOUTH CENTER28 E VILLAGE VIEW DRIVE DULUTH, MN 55805	41-0850223	501(C)(3)	5,000				IN SUPPORT OF THE" PLAY, THE FORGOTTEN BASIC NEED" EVENT TO BE HELD IN MAY 2011
VINE INC1828 E SUPERIOR ST DULUTH, MN 55812	41-1948095	501(C)(3)	5,000				TO SUPPORT THE VINE HOUSE, TRANSITIONAL HOUSING FOR MEN
CHUM102 W 2ND ST DULUTH, MN 55802	41-1227969	501(C)(3)	5,000				SUPPORT FOR SUMMER PROGRAMMING FOR CHILDREN AT THE HOMELESS FAMILY SHELTER
MINNESOTA JUSTICE FOUNDATION229 19TH AVENUE SOUTH ROOM 90 MINNEAPOLIS, MN 55455	41-1447537	501(C)(3)	5,000				TO PROVIDE SUPPORT FOR LEGAL ASSISTANCE FOR LOW-INCOME PEOPLE REGARDING HOUSING ISSUES
FLOODWOOD SERVICES AND TRAINING INC601 ASH STREET PO BOX 347 FLOODWOOD, MN 55736	41-1296075	501(C)(3)	5,000				TO PROVIDE OUT OF SCHOOL TIME ACTIVITIES FOR FLOODWOOD AREA YOUTH
RANGE RESPITE PROJECT 1309 20TH STREET SOUTH VIRGINIA, MN 55792	41-1726790	501(C)(3)	5,000				IN SUPPORT OF HOME-BASED RESPITE CARE AND CAREGIVER TRAINING AND EDUCATION
GRANT COMMUNITY SCHOOL COLLABORATIVE 1027 NORTH 8TH AVE E DULUTH, MN 55805	41-2002724	501(C)(3)	5,000				TO PROVIDE PLANNING AND CONSULTATION SERVICES FOR YOUTH SUPPORT TEAMS THROUGHOUT THE DULUTH SCHOOL DISTRICT
LUTHERAN SOCIAL SERVICE OF MN424 W SUPERIOR ST 204 ORDEAN BLDG DULUTH, MN 55802	41-0872993	501(C)(3)	20,000				IN SUPPORT OF SERVICES TO ASSIST YOUTH WHO ARE HOMELESS OR AT RISK OF HOMELESSNESS
MN ASSISTANCE COUNCIL FOR VETERANS360 ROBERT STREET NORTH SUITE 306 ST PAUL, MN 55101	41-1694717	501(C)(3)	20,000				IN SUPPORT OF OUTREACH EFFORTS TO VETERANS IN CRISIS IN NORTHEASTERN MINNESOTA
CHUM102 W 2ND ST DULUTH, MN 55802	41-1227969	501(C)(3)	20,000				IN SUPPORT OF WORK TO INCREASE ORGANIZATIONAL SUSTAINABILITY AND EFFECTIVENESS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number
41-1554455

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☑ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) THOMAS RENIER	(i)	150,137	23,822	0	8,563	28,317	210,839	0
	(ii)	0	0	0	0	0	0	0
(2) LYNN HAGLIN	(i)	128,573	0	0	7,689	19,947	156,209	0
	(ii)	0	0	0	0	0	0	0
(3) SCOTT MARTIN	(i)	142,009	0	0	8,215	600	150,824	0
	(ii)	0	0	0	0	0	0	0
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number
41-1554455

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art . . .				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .				
7 Boats and planes . . .				
8 Intellectual property . .				
9 Securities—Publicly traded	X	1	30,281	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ▶ (____________)				
26 Other ▶ (____________)				
27 Other ▶ (____________)				
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 |

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NORTHLAND FOUNDATION

Employer identification number
41-1554455

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		IN THE EVENT THAT THE SITTING CHAIR COMPLETES HIS/HER TERM AS CHAIR ON THE SAME DATE AS COMPLETING HIS OR HER FULL COMPLIMENT OF THREE (3) FULL AND CONSECUTIVE THREE (3) YEAR TERMS, THE RETIRING TRUSTEE WILL BE OFFERED THE OPPORTUNITY TO SERVE ONE (1) ADDITIONAL YEAR IN THE POSITION OF IMMEDIATE PAST CHAIR SHOULD THIS SITUATION OCCUR, AND THE POSITION IS ACCEPTED, THE STATUS OF THE POSITION WILL BE AS FOLLOWS THE IMMEDIATE PAST CHAIR SHALL BE CONSIDERED AN OFFICIAL TRUSTEE, WITH ALL RIGHTS AND VOTING PRIVILEGES, THE POSITION OF IMMEDIATE PAST CHAIR SHALL BE CONSIDERED INDEPENDENT OF THE ABOVE REQUIREMENT WHICH PRESCRIBES THE MINIMUM (11) AND MAXIMUM (13) NUMBER OF TRUSTEES OF THE CORPORATION

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE PRESIDENT AND THE CFO REVIEW A COPY OF THE 990 AFTER IT IS COMPLETED A COPY OF THE 990 IS THEN MADE AVAILABLE AT THE NEXT BOARD MEETING FOR REVIEW BY THE BOARD OF TRUSTEES DURING THAT BOARD MEETING, IT IS OPEN FOR DISCUSSION AND APPROVED BY THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	AT THE END OF EACH FISCAL YEAR, EVERY MEMBER OF THE BOARD OF TRUSTEES AND EVERY STAFF MEMBER FILLS OUT A "CONFLICT OF INTEREST" FORM AND INCLUDES ANY CONFLICTS OF INTEREST THEY MAY HAVE ALSO, IF THERE IS A BOARD MEMBER THAT HAS A CONFLICT WITH ANY GRANTS OR LOANS, THEY RECLUSE THEMSELVES FROM VOTING ON THAT PARTICULAR ITEM AT THE BOARD MEETING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE CHAIR OF THE BOARD USES DATA FROM COMPENSATION SURVEYS TO DETERMINE COMPENSATION LEVELS, AND THEN MEETS WITH THE PRESIDENT TO DISCUSS AFTER THE MEETING A RECOMMENDATION IS BROUGHT TO THE BOARD OF TRUSTEES AND A DECISION IS MADE BY THE BOARD THE SURVEYS USED ARE ONES THAT ARE DONE BY SIMILAR NON-PROFITS IN THE STATE TO BRING RECOMMENDATIONS TO THE BOARD OF TRUSTEES FOR ALL EMPLOYEE WAGES THE BOARD OF TRUSTEES APPROVE AN ANNUAL BUDGET THAT INCLUDES A "STANDARD" INCREASE FOR THE ENTIRE STAFF IN THE EVENT THAT ANY EMPLOYEE HAS INCREASED JOB RESPONSIBILITIES, THE PRESIDENT WILL BRING THAT RECOMMENDATION TO THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	THESE FORMS ARE AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THESE ARE NOT AVAILABLE TO THE PUBLIC AT THIS TIME

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 6,360,303

Identifier	Return Reference	Explanation
	FORM 990, PART XI, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) NORTHLAND ASSISTED LIVING LLC 202 WEST SUPERIOR STREET DULUTH, MN 55802 20-5440048	ASSISTED LIVING ORGANIZATION	MN	1,243,177	507,186	N/A
(2) MCGREGOR PROPERTIES LLC 202 WEST SUPERIOR STREET DULUTH, MN 55802 20-5490145	PROPERTIES	MN	80,482	1,521,291	N/A
(3) BUHL PROPERTY DEVELOPMENT LLC 202 WEST SUPERIOR STREET DULUTH, MN 55802 26-0558429	PROPERTIES	MN	93,659	1,721,008	N/A
(4) HOYT LAKES PROPERTY DEVELOPMENT LLC 202 WEST SUPERIOR STREET DULUTH, MN 55802 26-4816942	PROPERTIES	MN	356,405	2,587,122	N/A

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) NORTHLAND INSTITUTE 13911 RIDGEDALE DRIVE 260 MINNEAPOLIS, MN 55305 31-1504160	PROVIDE SUPPORT FOR SOCIAL AND ECONOMIC PROGRAMS IN THE AREA	MN	501(C)(3)	509(A)(2)	NORTHLAND FOUNDATION	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

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

		Yes	No
1 During the tax year, did the orgranization 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 **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p	Yes	
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r		No

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

(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) NORTHLAND INSTITUTE	K	0	
(2) NORTHLAND INSTITUTE	P	159,578	
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 41-1554455
Name: NORTHLAND FOUNDATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 727,833 including grants of $) (Revenue $)

LAUNCHED BY THE NORTHLAND FOUNDATION IN 1990, THE OVERALL GOAL OF THE KIDS PLUS PROGRAM IS TO IMPROVE THE WELL-BEING OF CHILDREN AND YOUTH IN NORTHEASTERN MINNESOTA AND SUPERIOR, WISONSIN KIDS PLUS INCLUDES A FAMILY OF PROGRAMS THAT SUPPORT CHILDREN AND YOUTH FROM BIRTH TO ADULTHOOD FOCUS AREAS INCLUDE 1) TECHNICAL ASSISTANCE AND COMMUNITY-BASED PLANNING, 2) EARLY CHILDHOOD DEVELOPMENT, 3) YOUTH LEADERSHIP, VOLUNTEERISM, AND PHILANTHROPY, 4) INTERGENERATIONAL PROGRAMMING, AND 5) TRAINING AND CONFERENCING THROUGH THE KIDS PLUS FAMILY OF PROGRAMS, THOUSANDS OF COMMUNITY MEMBERS, REPRESENTING A BROAD RANGE OF LOCAL SECTORS, HAVE BEEN ENGAGED WITH LOCAL INITIATIVES THAT SUPPORT CHILDREN AND YOUTH