

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 private foundations)

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

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

2018

Open to Public  
Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <b>NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.</b>		D Employer identification number <b>45-0226415</b>
Doing business as		E Telephone number <b>701-293-5011</b>	
Number and street (or P.O. box if mail is not delivered to street address) <b>4200 19TH AVE S</b>		Room/suite	G Gross receipts \$ <b>4,569,600.</b>
City or town, state or province, country, and ZIP or foreign postal code <b>FARGO, ND 58103</b>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
F Name and address of principal officer <b>RICHARD MCCARTNEY</b> <b>SAME AS C ABOVE</b>		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ► <b>1761</b>	
J Website: ► <a href="http://WWW.NLCBSA.ORG">WWW.NLCBSA.ORG</a>		K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► L Year of formation <b>1974</b> M State of legal domicile <b>ND</b>	

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <b>THE COUNCIL SERVES OTHERS AND IN OTHER WAYS, INSTILLS VALUES IN YOUNG PEOPLE THAT BETTER PREPARES</b>			
	2 Check this box ► <input type="checkbox"/> 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 <b>47</b>		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 <b>47</b>		
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 <b>104</b>		
	6 Total number of volunteers (estimate if necessary)	6 <b>2944</b>		
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a <b>35,030.</b>		
b Net unrelated business taxable income from Form 990-T, line 38	7b <b>230.</b>			
Revenue	8 Contributions and grants (Part VIII, line 1h)	RECEIVED	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	G	1,260,316.	1,044,706.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	B640	1,107,661.	677,893.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	GDEN, UT	518,650.	399,005.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,600,852.	1,247,067.
			4,487,479.	3,368,671.
			24,880.	16,575.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		1,677,282.	1,717,578.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		24,880.	16,575.
	b Total fundraising expenses (Part IX, column (D), line 25) ► <b>331,116.</b>		0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,947,866.	1,504,861.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		3,650,028.	3,239,014.
19 Revenue less expenses Subtract line 18 from line 12		837,451.	129,657.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	16,212,009.	15,752,552.	
	22 Net assets or fund balances Subtract line 21 from line 20	423,499.	430,312.	
		15,788,510.	15,322,240.	

## 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	► Signature of officer <b>RICHARD MCCARTNEY, SCOUT EXECUTIVE/CEO</b>	Date <b>6-13-1</b>			
	► Type or print name and title				
Paid Preparer	Print/Type preparer's name <b>TRACEE S. BUETHNER, CPA</b>	Preparer's signature <i>Tracee S. Bue</i>	Date <b>6/13/19</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01292877</b>
Use Only	Firm's name ► <b>WIDMER ROEL PC</b>		Firm's EIN ► <b>45-0334950</b>		
	Firm's address ► <b>4334 18TH AVE S, SUITE 101 FARGO, ND 58103-7414</b>		Phone no <b>701-237-6022</b>		

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes  No

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SCOUTS OF AMERICA, INC.

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**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

THE COUNCIL SERVES OTHERS AND IN OTHER WAYS, INSTILLS VALUES IN YOUNG PEOPLE THAT BETTER PREPARES YOUNG PEOPLE TO MAKE ETHICAL CHOICES OVER THEIR LIFETIME BY INSTILLING THE VALUES OF THE SCOUT OATH AND LAW.

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  X 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  X No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code \_\_\_\_\_) (Expenses \$ 2,163,937. including grants of \$ 16,575. ) (Revenue \$ 525,173. )

THE NORTHERN LIGHTS COUNCIL, BOY SCOUTS OF AMERICA IS A NOT-FOR-PROFIT ORGANIZATION DEVOTED TO OUR MISSION OF PREPARING YOUNG PEOPLE TO MAKE ETHICAL AND MORAL CHOICES OVER THEIR LIFETIME BY INSTILLING IN THEM VALUES OF THE SCOUT OATH AND LAW. THIS MISSION IS IMPLEMENTED THROUGH FIVE ELEMENTS THAT ENCOMPASS THE FOUNDATION OF SCOUTING, LEADERSHIP, ACHIEVEMENT, CHARACTER, SERVICE AND OUTDOORS. THE PROGRAMS OF SCOUTING INCLUDE; CUB SCOUTS FOR BOYS AND GIRLS IN THE FIRST THROUGH FIFTH GRADE, SCOUTS BSA FOR YOUNG MEN AND WOMEN 14 THROUGH 17 YEARS OF AGE, AND VENTURING FOR YOUNG MEN AND WOMEN 14 THROUGH 20 YEARS OF AGE. THE COUNCIL ALSO SERVES YOUTH THROUGH EXPLORING, A CAREER DEVELOPMENT PROGRAM AND WITH LEARNING FOR LIFE, A CLASSROOM BASED CHARACTER EDUCATION AND DEVELOPMENT PROGRAM ENCOMPASSING ELEMENTARY, JUNIOR HIGH

4b (Code \_\_\_\_\_) (Expenses \$ 621,901. including grants of \$ \_\_\_\_\_) (Revenue \$ 117,690. )

CAMP OPERATIONS - CAMPS ARE USED BY SCOUTS AND ADULT VOLUNTEERS FOR OUTDOOR CAMPING ACTIVITIES, TRAINING COURSES, CONFERENCES, AND MEETINGS. CAMP IS OUR OUTDOOR CLASSROOM TO TEACH SKILLS, BUILD CHARACTER, PROMOTE GOOD CITIZENSHIP, AND EARN MERIT BADGES BASED ON LIFE LESSONS, SKILLS, HOBBIES AND OCCUPATIONS.

4c (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4d Other program services (Describe in Schedule O)

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4e Total program service expenses ► 2,785,838.

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**Part IV Checklist of Required Schedules**

	<b>Yes</b>	<b>No</b>
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3 X	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
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? <i>If "Yes," complete Schedule C, Part III</i>	5 X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable <ul style="list-style-type: none"> <li>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i></li> <li>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? <i>If "Yes," complete Schedule D, Part VII</i></li> <li>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? <i>If "Yes," complete Schedule D, Part VIII</i></li> <li>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? <i>If "Yes," complete Schedule D, Part IX</i></li> <li>e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i></li> <li>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)? <i>If "Yes," complete Schedule D, Part X</i></li> </ul>	11a X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <ul style="list-style-type: none"> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i></li> </ul>	12a X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	12b X	
14a Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i></li> </ul>	13 X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14a X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	14b X	
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? <i>If "Yes," complete Schedule G, Part I</i>	15 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	16 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	17 X	
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> <ul style="list-style-type: none"> <li>b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> </ul>	18 X	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	19 X	
	20a X	
	20b	
	21 X	

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**Part IV Checklist of Required Schedules (continued)**

	<b>Yes</b>	<b>No</b>
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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 <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a X	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a 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 X	
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26 X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27 X	
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b X	
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 X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31 X	
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32 X	
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33 X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36 X	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37 X	
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
Note. All Form 990 filers are required to complete Schedule O		
<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b>		
Check if Schedule O contains a response or note to any line in this Part V		

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  
 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  
 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

	<b>Yes</b>	<b>No</b>
1a	1a	3
1b	1b	0
1c	1c X	

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

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	104
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	<input checked="" type="checkbox"/>
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<input checked="" type="checkbox"/>
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b If "Yes," enter the name of the foreign country ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<input checked="" type="checkbox"/>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<input checked="" type="checkbox"/>
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 as charitable contributions?	6a	<input checked="" type="checkbox"/>
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	<input checked="" type="checkbox"/>
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>	7a	<input checked="" type="checkbox"/>
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?	7b	<input checked="" type="checkbox"/>
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	<input checked="" type="checkbox"/>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d If "Yes," indicate the number of Forms 8282 filed during the year	7e	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9a	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>	9b	
<b>10 Section 501(c)(7) organizations.</b> Enter	10a	
a Initiation fees and capital contributions included on Part VIII, line 12	10b	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	11a	
<b>11 Section 501(c)(12) organizations.</b> Enter	11b	
a Gross income from members or shareholders	12a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	12b	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	13a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13b	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	13c	
a Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O</i>	14a	<input checked="" type="checkbox"/>
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	14b	
c Enter the amount of reserves on hand	15	<input checked="" type="checkbox"/>
14a Did the organization receive any payments for indoor tanning services during the tax year?	14b	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	15	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N	16	<input checked="" type="checkbox"/>
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O		

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

Check if Schedule O contains a response or note to any line 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	47	
1b		47	
2	Enter the number of voting members included in line 1a, above, who are independent	2	X
3	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?	3	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6	Did the organization have members or stockholders?	6	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8a	X
a	The governing body?	8b	X
b	Each committee with authority to act on behalf of the governing body?	9	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	13	X
13	Did the organization have a written whistleblower policy?	14	X
14	Did the organization have a written document retention and destruction policy?	15a	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15b	X
a	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization 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	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► MN, ND
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►  
RICHARD MCCARTNEY - 701-293-5011  
4200 19TH AVE S, FARGO, ND 58103

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Form 990 (2018)

45-0226415 Page 7

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

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

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

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

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

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

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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) DAVID SPRYNCZYNATYK <u>COUNCIL PRESIDENT</u>	1.00	X	X				0.	0.	0.
(2) MIKE BRIGGS <u>COUNCIL COMMISSIONER</u>	1.00	X	X				0.	0.	0.
(3) DAVID BERGSTROM <u>COUNCIL TREASURER</u>	1.00	X	X				0.	0.	0.
(4) STEPHEN RUFER <u>VICE PRESIDENT FINANCE</u>	1.00	X	X				0.	0.	0.
(5) TIM SAYLER <u>VICE PRESIDENT ADMINISTRAT</u>	1.00	X	X				0.	0.	0.
(6) AL DOHRMANN <u>VICE PRESIDENT DISTRICT OP</u>	1.00	X	X				0.	0.	0.
(7) TIM TELLO <u>VICE PRESIDENT ENDOWMENT</u>	1.00	X	X				0.	0.	0.
(8) MARK ZIMMERMAN <u>VICE PRESIDENT MEMBERSHIP</u>	1.00	X	X				0.	0.	0.
(9) STEVE SHARK <u>VICE PRESIDENT PROGRAM</u>	1.00	X	X				0.	0.	0.
(10) JOHN STERN <u>VICE PRESIDENT MARKETING</u>	1.00	X	X				0.	0.	0.
(11) BRAD BALLWEBER <u>IMMEDIATE PAST PRESIDENT</u>	1.00	X	X				0.	0.	0.
(12) DOUG RESTEMAYER <u>PAST PRESIDENT</u>	1.00	X	X				0.	0.	0.
(13) AL ERICKSON <u>PAST PRESIDENT</u>	1.00	X	X				0.	0.	0.
(14) JOHN BOULGER <u>LEGAL COUNSEL</u>	1.00	X	X				0.	0.	0.
(15) JOEL ARNASON <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(16) JEREMY BERGER <u>DISTRICT CHAIRMAN DISTRICT #10</u>	1.00	X					0.	0.	0.
(17) RYAN BARTH <u>DIRECTOR</u>	1.00	X					0.	0.	0.

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Form 990 (2018)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(18) JIM BLOTSKY <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(19) CAMERON CARLSON <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(20) NORM CLARK <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(21) TIM COX <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(22) MARK DEMARTELAERE <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(23) RICHARD ESPELAND <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(24) DANN GREENWOOD <u>DIRECTOR</u>	1.00	X	-				0.	0.	0.
(25) RYAN HANSEN <u>DIRECTOR</u>	1.00	X					0.	0.	0.
(26) KELVIN HULLET <u>DIRECTOR</u>	1.00	X					0.	0.	0.
<b>1b Sub-total</b>						►	0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>						►	279,062.	0.	167,905.
<b>d Total (add lines 1b and 1c)</b>						►	279,062.	0.	167,905.

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

	Yes	No
3	X	
4	X	
5	X	

**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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

**SEE PART VII, SECTION A CONTINUATION SHEETS**

Form 990 (2018)

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Form 990

45-0226415

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)				(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	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		
(27) PETE ISOM	1.00								
<u>DISTRICT CHAIRMAN DISTRICT #14</u>		X						0.	0.
(28) SHAWN JOHNSTON	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(29) DAVE LAKEFIELD	1.00							0.	0.
<u>DISTRICT CHAIRMAN DISTRICT #11</u>		X						0.	0.
(30) MARK MALMBERG	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(31) LARRY MARTIN	1.00							0.	0.
<u>O/A LODGE ADVISOR</u>		X						0.	0.
(32) LARRY MASLOWSKI	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(33) BARRY MEDD	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(34) DR. THOMAS MITZEL	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(35) MARK NELSON	1.00							0.	0.
<u>DISTRICT CHAIRMAN DISTRICT #8</u>		X						0.	0.
(36) DAN OLSON	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(37) RICHARD OLSON	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(38) ADRIAN PANTHER	1.00							0.	0.
<u>DISTRICT CHAIRMAN DISTRICT #4</u>		X						0.	0.
(39) KENT REIERSON	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(40) DALE SANDSTROM	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(41) ED SCHAFER	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(42) RONALD SCHNEIDER	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(43) STEVE SMITH	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(44) WAYNE STENEHJEM	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(45) CRAIG STREHLOW	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.
(46) JON WANZEK	1.00							0.	0.
<u>DIRECTOR</u>		X						0.	0.

Total to Part VII, Section A, line 1c

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

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Form 990 (2018)

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**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	1a 74,817. 1b 516,673. 1c 1d 1e 1f 453,216. 26,821. ► 1,044,706.			
Program Service Revenue	2 a CAMPING REVENUES b ACTIVITIES REVENUE c RENTAL & CAMP FEE d e f All other program service revenue g Total. Add lines 2a-2f	Business Code 721210 525,173. 721210 117,690. 721210 35,030. ► 677,893.	525,173. 117,690. 35,030.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ► 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities ► 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory ► 11 a MISCELLANEOUS b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions	► 69,252. ► 32,230.  (i) Real (ii) Personal 314,670. 21,251. 0. 6,168. 314,670. 15,083. ► 329,753.  a 96,988. b 28,725. ► 68,263.  a b ► a 2,167,791. b 1,166,036. ► 1,001,755.	69,252. 32,230.  329,753.  68,263.  68,263.  1,001,755.		69,252. 32,230.  329,753.  68,263.
	Miscellaneous Revenue	Business Code 900099 144,819.	144,819.		144,819.
	b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions	► 144,819. ► 3,368,671.	642,863.	35,030.	1,646,072.

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

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**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)

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			-	-
2 Grants and other assistance to domestic individuals See Part IV, line 22	16,575.	16,575.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	313,660.	263,180.	12,256.	38,224.
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	1,068,468.	897,379.	41,538.	129,551.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	49,868.	41,969.	2,149.	5,750.
9 Other employee benefits	181,183.	150,382.	7,247.	23,554.
10 Payroll taxes	104,399.	88,950.	3,751.	11,698.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	19,228.	12,002.	5,747.	1,479.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	35,075.	21,893.	10,485.	2,697.
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	13,010.	8,121.	3,889.	1,000.
12 Advertising and promotion	2,452.	2,055.	344.	53.
13 Office expenses	104,990.	86,500.	2,590.	15,900.
14 Information technology	11,429.	7,134.	3,416.	879.
15 Royalties				
16 Occupancy	280,042.	247,618.	7,661.	24,763.
17 Travel	89,805.	76,596.	3,124.	10,085.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	36,538.	31,939.	692.	3,907.
20 Interest				
21 Payments to affiliates	40,000.	40,000.		
22 Depreciation, depletion, and amortization	395,303.	346,140.	11,918.	37,245.
23 Insurance	98,411.	88,231.	2,471.	7,709.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUPPLIES	194,055.	190,087.	448.	3,520.
b RECOGNITION AWARDS	110,195.	104,245.	48.	5,902.
c RENT AND MAINTENACE OF	74,328.	64,842.	2,286.	7,200.
d				
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	3,239,014.	2,785,838.	122,060.	331,116.
26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ►  if following SOP 98-2 (ASC 958-720)

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Form 990 (2018)

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**Part X . Balance Sheet**

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

		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing	1		
	2 Savings and temporary cash investments	1,740,611.	2	1,472,555.
	3 Pledges and grants receivable, net	315,016.	3	280,802.
	4 Accounts receivable, net	196,816.	4	282,191.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5		
	6 Loans and other 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 instr) Complete Part II of Sch L	6		
	7 Notes and loans receivable, net	7		
	8 Inventories for sale or use	108,342.	8	104,599.
	9 Prepaid expenses and deferred charges	38,580.	9	30,738.
<b>Assets</b>	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 12,976,507.		
	b Less accumulated depreciation	10b 4,099,292.	8,716,158.	10c 8,877,215.
	11 Investments - publicly traded securities	1,073,921.	11	
	12 Investments - other securities See Part IV, line 11	3,267,902.	12	4,027,893.
	13 Investments - program-related See Part IV, line 11	13		
	14 Intangible assets	14		
	15 Other assets See Part IV, line 11	754,663.	15	676,559.
	<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	16,212,009.	16	15,752,552.
	17 Accounts payable and accrued expenses	126,087.	17	176,254.
	18 Grants payable	18		
	19 Deferred revenue	10,705.	19	10,298.
	20 Tax-exempt bond liabilities	20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D	279,430.	21	232,696.
<b>Liabilities</b>	22 Loans and other 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	23		
	24 Unsecured notes and loans payable to unrelated third parties	24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	7,277.	25	11,064.
	<b>26 Total liabilities.</b> Add lines 17 through 25	423,499.	26	430,312.
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	13,511,732.	27	13,151,129.
	28 Temporarily restricted net assets	788,227.	28	0.
	29 Permanently restricted net assets	1,488,551.	29	2,171,111.
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> 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	15,788,510.	33	15,322,240.
	<b>34 Total liabilities and net assets/fund balances</b>	16,212,009.	34	15,752,552.

Form 990 (2018)

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Form 990 (2018)

45-0226415 Page 12

**Part XI. Reconciliation of Net Assets**

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

1	1	3,368,671.
2	2	3,239,014.
3	3	129,657.
4	4	15,788,510.
5	5	-595,929.
6	6	
7	7	
8	8	
9	9	2.
10	10	15,322,240.

**Part XII. Financial Statements and Reporting**

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

1 Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both \_\_\_\_\_  
 Separate basis  Consolidated basis  Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both \_\_\_\_\_  
 Separate basis  Consolidated basis  Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b	X	
2c	X	
3a	X	
3b		

Form 990 (2018)

**SCHEDULE A**  
(Form 990 or 990-EZ)

## Public Charity Status and Public Support

OMB No 1545-0047

2018

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the la

► Go to [www.fcc.gov](http://www.fcc.gov) for instructions and the latest information.

Name of the organization NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC. Employer identification number 45-0226415

**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 12, 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 (Form 990 or 990-EZ) )

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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university \_\_\_\_\_

10  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 )

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

12  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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations \_\_\_\_\_

g Provide the following information about the supported organization(s) \_\_\_\_\_

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(IV) Is the organization listed in your governing document?		(V) Amount of monetary support (see instructions)	(VI) Amount of other support (see instructions)
			Yes	No		
Total						

Total

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**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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1351388.	787,795.	802,771.	1260316.	1044706.	5246976.
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	1351388.	787,795.	802,771.	1260316.	1044706.	5246976.
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)						222,591.
<b>6 Public support.</b> Subtract line 5 from line 4						5024385.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	1351388.	787,795.	802,771.	1260316.	1044706.	5246976.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	211,495.	142,939.	114,893.	130,567.	101,428.	701,322.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		7,227.	28,502.	47,261.	35,030.	118,020.
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	128,884.	183,517.	139,919.	164,415.	144,819.	761,554.
<b>11 Total support.</b> Add lines 7 through 10						6827872.
12 Gross receipts from related activities, etc (see instructions)				12		3,212,545.

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	73.59	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	72.17	%
<b>16a 33 1/3% support test - 2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		X	► <input type="checkbox"/>
<b>b 33 1/3% support test - 2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2018.</b> 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 <b>stop here</b> . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2017.</b> 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 <b>stop here</b> . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and <b>see instructions</b>			► <input type="checkbox"/>

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**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
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						
<b>6 Total. Add lines 1 through 5</b>						
<b>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</b>	---	---	---	---	---	---
<b>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</b>						
<b>c Add lines 7a and 7b</b>						
<b>8 Public support. (Subtract line 7c from line 6)</b>						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 VI)						
<b>13 Total support. (Add lines 9, 10c, 11, and 12)</b>						
<b>14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</b>	► <input type="checkbox"/>					

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

**19a 33 1/3% support tests - 2018.** 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 - 2017.** 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 ►

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**Part IV. Supporting Organizations**

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

**Section A. All Supporting Organizations**

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain

2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)

3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination

c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use

4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below

b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations

c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes

5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)

b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?

c Substitutions only. Was the substitution the result of an event beyond the organization's control?

6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

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## Part IV. Supporting Organizations (continued)

11. Has the organization accepted a gift or contribution from any of the following persons?

- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

Yes	No
11a	
11b	
11c	

## Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization

Yes	No
1	
2	

## Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

Yes	No
1	

## Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard

Yes	No
1	
2	
3	

## Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a  The organization satisfied the Activities Test. Complete line 2 below
  - b  The organization is the parent of each of its supported organizations. Complete line 3 below
  - c  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)

## 2 Activities Test Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement

Yes	No
2a	
2b	

## 3 Parent of Supported Organizations Answer (a) and (b) below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Yes	No
3a	
3b	

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**Part V. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

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

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
<b>9 Distributable amount for 2018 from Section C, line 6</b>	
<b>10 Line 8 amount divided by line 9 amount</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
<b>1 Distributable amount for 2018 from Section C, line 6</b>			
<b>2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions</b>			
<b>3 Excess distributions carryover, if any, to 2018</b>			
<b>a From 2013</b>			
<b>b From 2014</b>			
<b>c From 2015</b>			
<b>d From 2016</b>			
<b>e From 2017</b>			
<b>f Total of lines 3a through e</b>			
<b>g Applied to underdistributions of prior years</b>			
<b>h Applied to 2018 distributable amount</b>			
<b>i Carryover from 2013 not applied (see instructions)</b>			
<b>j Remainder Subtract lines 3g, 3h, and 3i from 3f</b>			
<b>4 Distributions for 2018 from Section D, line 7 \$</b>			
<b>a Applied to underdistributions of prior years</b>			
<b>b Applied to 2018 distributable amount</b>			
<b>c Remainder Subtract lines 4a and 4b from 4</b>			
<b>5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions</b>			
<b>6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions</b>			
<b>7 Excess distributions carryover to 2019. Add lines 3j and 4c</b>			
<b>8 Breakdown of line 7</b>			
<b>a Excess from 2014</b>			
<b>b Excess from 2015</b>			
<b>c Excess from 2016</b>			
<b>d Excess from 2017</b>			
<b>e Excess from 2018</b>			

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## Part VI.

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

**SCHEDULE D**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

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

► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2018**Open to Public  
InspectionName of the organization **NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.** Employer identification number **45-0226415****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in 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 can 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" on 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 education)  Preservation of a historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 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 Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcing conservation easements during the year  
► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIII, 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" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

b Assets included in Form 990, Part X ► \$ \_\_\_\_\_

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Schedule D (Form 990) 2018

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

3 Using the organization's acquisition, 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

d  Loan or exchange programs

b  Scholarly research

e  Other \_\_\_\_\_

c  Preservation for future generations

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

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" on 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 XIII and complete the following table

	Amount
1c	279,445.
1d	522,873.
1e	569,622.
1f	232,696.

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

Yes

No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on 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	4,868,884	4,401,348	4,225,101	4,509,958	4,399,723
b Contributions	93,871	90,686	114,944	49,598	174,036
c Net investment earnings, gains, and losses	-387,283	396,731	79,082	-316,375	-45,249
d Grants or scholarships					
e Other expenditures for facilities and programs	2,466	19,881	17,779	18,080	18,552
g End of year balance	4,573,006	4,868,884	4,401,348	4,225,101	4,509,958

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► 66.00 %

b Permanent endowment ► 34.00 %

c Temporarily restricted endowment ► \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%

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

	Yes	No
3a(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,012,639.			2,012,639.
b Buildings		7,509,789.	2,149,875.		5,359,914.
c Leasehold improvements		891,639.	411,980.		479,659.
d Equipment		2,467,098.	1,537,437.		929,661.
e Other		95,342.			95,342.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

► 8,877,215.

Schedule D (Form 990) 2018

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Schedule D (Form 990) 2018

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**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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		
(3) Other		
(A) BSA COMMINGLED FUND		
(B)	3,933,434.	COST
(C) CASH SURRENDER VALUE OF		
(D) LIFE INSURA	94,459.	COST
(E)		
(F)		
(G)		
(H)		
<b>Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►</b>	<b>4,027,893.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)	-	
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15 ) ►</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OTHER CURRENT LIABILITIES	11,064.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ►</b>	<b>11,064.</b>

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

Schedule D (Form 990) 2018

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Schedule D (Form 990) 2018

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**Part XI. Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains (losses) on investments	2a
b Donated services and use of facilities	2b
c Recoveries of prior year grants	2c
d Other (Describe in Part XIII )	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 XIII )	4b
c Add lines 4a and 4b	4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

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 XIII )	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 XIII )	4b
c Add lines 4a and 4b	4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5

**Part XIII Supplemental Information.**

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

PART IV, LINE 2B:

CUSTODIAL ACCOUNTS - UNIT DEPOSITS: THESE ACCOUNTS REPRESENT MONIES HELD BY THE COUNCIL FOR THE RESPECTIVE TROOPS, PACKS, POSTS, AND CREWS IN THE RESPECTIVE AREAS FARGO, GRAND FORKS, MINOT, AND BISMARCK. CUSTODIAL ACCOUNTS ALSO FOR REGISTRATION FEES AND "BOY'S LIFE" MAGAZINE. THESE ARE FLOW-THROUGH ACCOUNTS. NLC RECEIVES THE MONEY FROM PACKS, TROOPS, ETC. AND THE MONEY IS AUTOMATICALLY WITHDRAWN FROM NLC'S ACCOUNT BY THE NATIONAL BSA EACH MONTH.

PART X, LINE 2:

THE COUNCIL IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM FEDERAL INCOME TAXES BY VIRTUE OF A GROUP EXEMPTION GRANTED TO THE BOY SCOUTS OF

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Schedule D (Form 990) 2018

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**Part XIII** Supplemental Information (continued)

AMERICA UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND FROM THE PAYMENT OF STATE INCOME TAXES UNDER SECTION 57-38-09 OF THE NORTH DAKOTA CENTURY CODE AND SECTION 272.02 OF THE MINNESOTA STATUTE. HOWEVER, CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE COUNCIL'S TAX EXEMPT PURPOSE ARE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 509(A)(1) OF THE CODE. A PROVISION FOR INCOME TAXES IS RECORDED WHEN THERE IS UNRELATED BUSINESS INCOME TAX. FOR THE YEARS ENDED DECEMBER 31, 2018 AND 2017, THERE WERE NO TAXES PAID ON UNRELATED BUSINESS INCOME.

IN ACCORDANCE WITH ASC 740-10-25, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THE COUNCIL WILL RECOGNIZE THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION WHEN IT IS MORE LIKELY THAN NOT, BASED ON THE TECHNICAL MERITS, THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION. THE COUNCIL DOES NOT BELIEVE THAT THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. NO INTEREST OR PENALTIES ARE RECORDED OR INCLUDED IN THE FINANCIAL STATEMENTS AS OF DECEMBER 31, 2018.

WITH FEW EXCEPTIONS, THE COUNCIL IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2015.

**SCHEDULE G**  
(Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

2018

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization	<b>NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.</b>	Employer identification number <b>45-0226415</b>
--------------------------	-------------------------------------------------------------------	-----------------------------------------------------

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

**Total**

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

45-0226415 Page 2

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		FARGO LAWN SOCIAL (event type)	GOOD SCOUT LUNCHEON (event type)	4 (total number)	
Revenue	1 Gross receipts	24,440.	25,550.	46,998.	96,988.
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	24,440.	25,550.	46,998.	96,988.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	1,254.		4,607.	5,861.
	7 Food and beverages	4,270.	3,171.	8,252.	15,693.
	8 Entertainment	400.		1,000.	1,400.
	9 Other direct expenses		814.	4,957.	5,771.
	10 Direct expense summary Add lines 4 through 9 in column (d)				► 28,725.
	11 Net income summary Subtract line 10 from line 3, column (d)				► 68,263.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				►
	8 Net gaming income summary Subtract line 7 from line 1, column (d)				►

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

b If "Yes," explain \_\_\_\_\_

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Schedule G (Form 990 or 990-EZ) 2018

45-0226415 Page 3

11 Does the organization conduct gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount

of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

Director/officer  Employee  Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part IV** **Supplemental Information (continued)**



Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated 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 noncash assistance
SCHOLARSHIP	5	2,432.	0.		
REGISTRATION FEES	265	7,688.	0.		
UNIFORM ASSISTANCE	8	267.	0.		
FREE RANK ADVANCEMENTS	3110	6,188.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

PART I, LINE 2:

THE ORGANIZATION REQUIRES UNIT LEADERS TO COMPLETE AN APPLICATION FORM

INDICATING NEED. THE APPLICATION IS REVIEWED BY THE COUNCIL AND APPROVED.

THE ORGANIZATION ALSO PROVIDES SCHOLARSHIPS TO HELP PAY FOR SCHOOL AND PAYMENT IS PAID DIRECTLY TO THE COLLEGE.

**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" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

Employer identification number  
**45-0226415**

**Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to

establish compensation of the CEO/Executive Director, but explain in Part III

<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed on 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?  
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?  
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

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III

6 For persons listed on 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?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a	X	
4b	X	
4c	X	
5a	X	
5b	X	
6a	X	
6b	X	
7	X	
8	X	
9		

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

Schedule J (Form 990) 2018

**NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.**

**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 on 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 aren't listed on Form 990, Part VII

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(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 in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROGER B. HOYT PAST SCOUT EXECUTIVE - NONVOTIN	(i) <b>174,958.</b> 0.	0.	0.	0.	<b>8,599.</b> 0.	<b>272,777.</b> 0.	0.
(2) DARIN STEINDL DIRECTOR OF FIELD SERVICE/COO	(i) <b>104,104.</b> 0.	0.	0.	0.	<b>63,294.</b> 0.	<b>174,190.</b> 0.	0.
	(ii)						
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NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Schedule J (Form 990) 2018

**Part III** Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

45-0226415

Page 3

**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization **NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.** Employer identification number **45-0226415**

**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 noncash 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				
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	X	8	7,200.	
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ( <u>SUPPLIES</u> )	X	14	13,798.	
26 Other ► ( <u>AUTO AND TRAV</u> )	X	13	5,823.	
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

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a	X	
31	X	
32a	X	

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

Schedule M (Form 990) 2018

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Schedule M (Form 990) 2018

45-0226415 Page 2

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Employer identification number  
45-0226415

### FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

YOUNG PEOPLE TO MAKE ETHICAL CHOICES OVER THEIR LIFETIME BY INSTILLING  
THE VALUES OF THE SCOUT OATH AND LAW.

### FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

AND HIGH SCHOOL AGE STUDENTS. THE NORTHERN LIGHTS COUNCIL, B.S.A.'S  
MOST RECOGNIZABLE METHOD FOR DELIVERING THESE PROGRAMS IS THROUGH  
OUTDOOR ACTIVITIES THAT INCLUDE DAY CAMPS, RESIDENT CAMPS, COUNCIL  
ORGANIZED FAMILY CAMPS, CAMPOREES, SUMMER CAMPS, NATIONAL JAMBOREES AND  
HIGH ADVENTURE CAMPING. A SECOND METHOD FOR ACHIEVING THE MISSION IS  
THROUGH THE AWARDS AND RECOGNITION YOUTH RECEIVE FROM ACHIEVEMENT OF  
SKILLS, PARTICIPATION IN ACTIVITIES, COMMUNITY SERVICE AND ADVANCEMENT  
WITHIN THE VARIOUS PROGRAMS.

OUR COUNCIL PROVIDES SERVICE TO 78 COUNTIES IN 4 STATES. CURRENTLY WE  
HAVE 9,948 YOUTH MEMBERS AND 2,944 ADULT VOLUNTEER LEADERS IN OUR  
COUNCIL. OVER 13,000 YOUTH WERE SERVED THROUGHOUT 2018. ANY YOUTH OR  
LEADER IS ELIGIBLE TO JOIN THE SCOUTING PROGRAM IF THEY ARE WILLING TO  
SUBSCRIBE TO THE BSA'S DECLARATION OF RELIGIOUS PRINCIPLE, THE POLICIES  
AND BYLAWS OF THE BOY SCOUTS, AND THE AGE/GRADE JOINING REQUIREMENTS.

### FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERSHIP OF THE ORGANIZATION CONSISTS OF THE FOLLOWING:

ACTIVE MEMBERS - CONSISTS OF CHARTERED ORGANIZATION REPRESENTATIVES AND  
MEMBERS AT LARGE. THE LOCAL COUNCIL SHALL HAVE NO FEWER THAN 100 ACTIVE

Name of the organization NORTHERN LIGHTS COUNCIL OF BOY  
SCOUTS OF AMERICA, INC.

Employer identification number  
45-0226415

MEMBERS. ACTIVE MEMBERS WILL HAVE A VOTE AT THE ANNUAL MEETING OF THE LOCAL COUNCIL.

ASSOCIATE MEMBERS - MAY BE ELECTED BY ACTIVE MEMBERS AND ARE INDIVIDUALS DESIRING TO MAINTAIN AN ACTIVE SCOUTER MEMBERSHIP WITHOUT ASSIGNMENT TO ACTIVE SERVICE. ASSOCIATE MEMBERS SHALL NOT HAVE A VOTE AT LOCAL COUNCIL MEETINGS.

FRIENDS OF SCOUTING - LOCAL COUNCIL MAY ENROLL AS FRIENDS OF SCOUTING PERSONS DESIRING TO BE IDENTIFIED THROUGH THEIR FINANCIAL SUPPORT AND INFLUENCE IN EXPANSION OF THE CORPORATION'S PROGRAM. FRIENDS OF SCOUTING SHALL HAVE NO VOTE.

HONORARY MEMBERS - ACTIVE MEMBERS OF LOCAL COUNCIL MAY ELECT AS HONORARY MEMBERS PERSONS WHOSE ELECTION MAY FURTHER THE SCOUTING PROGRAM. HONORARY MEMBERS SHALL HAVE NO VOTE.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL ACTIVE MEMBERS SHALL HAVE A VOTE AT THE ANNUAL MEETING OF THE LOCAL COUNCIL. THE ANNUAL MEETING OF THE LOCAL COUNCIL SHALL BE FOR THE PURPOSE OF (A) RECEIVING ANNUAL REPORTS, (B) ELECTING MEMBERS, (C) RECEIVING AND APPROVING FINANCIAL STATEMENTS, (D) TRANSACTING ANY OTHER BUSINESS THAT MAY COME BEFORE THE MEETING.

IN ADDITION TO THE ANNUAL MEETING, THE LOCAL COUNCIL MAY HAVE SUCH OTHER REGULAR MEETINGS AS MAY BE ESTABLISHED BY RESOLUTION OF THE EXECUTIVE BOARD. ALL ACTIVE MEMBERS SHALL HAVE A VOTE AT THESE MEETINGS AS WELL.

Name of the organization	NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.	Employer identification number
		45-0226415

ASSOCIATE MEMBERS, FRIENDS OF SCOUTING, AND HONORARY MEMBERS SHALL NOT HAVE A VOTE AT THESE MEETINGS.

FORM 990, PART VI, SECTION A, LINE 7B:

NATIONAL COUNCIL

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 WILL BE PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO FILING EITHER BY A PRESENTATION TO THE GROUP OR BY EMAILING A COPY OF THE 990 TO EACH BOARD MEMBER PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ORGANIZATION ANNUALLY REQUIRES CONFLICTS OF INTEREST TO BE DISCLOSED IN WRITING BY ALL BOARD MEMBERS AND KEY EMPLOYEES.

FORM 990, PART VI, SECTION B, LINE 15:

THE COUNCIL PRESIDENT APPOINTS, EACH YEAR, A COMPENSATION AND BENEFITS COMMITTEE WHOSE RESPONSIBILITIES ARE TO REVIEW THE PERFORMANCE OF THE EXECUTIVE DIRECTOR AND KEY EMPLOYEES AND TO RECOMMEND FOR THE APPROVAL TO THE EXECUTIVE BOARD SALARY AND BENEFITS FOR SAID INDIVIDUALS. THE EXECUTIVE BOARD AND COMPENSATION AND BENEFITS COMMITTEE ARE CHARGED WITH ENSURING THAT THE SCOUT EXECUTIVE COMPENSATION POLICY AND PROCEDURES SATISFY THE IRS INTERMEDIATE SANCTIONS REQUIREMENTS.

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

ORGANIZATION MAKES GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. CONFLICT OF INTEREST POLICY IS ALSO ON THE ORGANIZATION'S WEBSITE.

Name of the organization	NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.	Employer identification number
		45-0226415

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:ROUNDING

2.

FORM 990 PART XII LINE 2CTHIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.FORM 990, ITEM B, NAME CHANGE - AMENDED RETURN

THE AMENDED RETURN IS TO CORRECT THE NAME BY REMOVING "THE" FROM THE NAME OF ORGANIZATION. THE ORIGINAL RETURN SHOWED HE NAME AS NORTHERN LIGHTS COUNCIL OF THE BOY SCOUTS OF AMERICA, INC. THE CORRECT NAME IS NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, INC.

PLEASE SEE THE ENCLOSED COPY OF THE RESTATED ARTICLES OF INCORPORATION.



**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

**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.

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- l Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(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)

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions