

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2020 calendar year, or tax year beginning , 2020, and ending , 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization **NORTHWOODS HUMANE SOCIETY**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 264
 City or town, state or province, country, and ZIP or foreign postal code
WYOMING, MN 55092

D Employer identification number
41-1487872

E Telephone number
(651) 895-3555

G Gross receipts \$ **534,007**

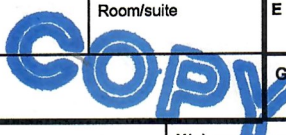
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.NORTHWOODSHS.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1975** **M** State of legal domicile: **MN**



Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>THE ADOPTION AND CARE OF COMPANION ANIMALS.</u>		
	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	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	27
	6 Total number of volunteers (estimate if necessary)	6	100
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	4,568
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,221,779	Current Year 315,164
	9 Program service revenue (Part VIII, line 2g)	192,897	209,683
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14	4,568
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	929	(677)
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,415,619	528,738
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	233,939	252,766
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,378		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	217,276	262,766
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	451,215	515,532	
19 Revenue less expenses. Subtract line 18 from line 12	964,404	13,206	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,341,736	End of Year 1,347,043
	21 Total liabilities (Part X, line 26)	111,294	103,395
	22 Net assets or fund balances. Subtract line 21 from line 20	1,230,442	1,243,648

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

▶ **MARGARET GUPTILL**
Signature of officer Date

▶ **MARGARET GUPTILL, PRESIDENT**
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **DAVID E ENGELKING** Preparer's signature: **DAVID E ENGELKING** Date: **10-14-2021** Check if self-employed PTIN: **P00749619**

Firm's name ▶ **DAVID E ENGELKING LTD** Firm's EIN ▶
 Firm's address ▶ **80 NW 3RD STREET FOREST LAKE MN 55025** Phone no. **651-464-3231**

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

For Paperwork Reduction Act Notice, see the separate instructions.