# 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

ΑF	or the	2023 calendar year, or tax year beginning and	ending									
<b>B</b> c	heck if	C Name of organization		D Employer identific	cation number							
	Addres	NORTHWEST COLLEGE FOUNDATION										
	Name change	Doing business as		83-02110								
	Initial return Final return/	231 WEST 6TH STREET	Room/suite	E Telephone number 307 754-6110								
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	17,997,940.							
	Ameno return	POWELL, WY 82435		H(a) Is this a group return								
	Application	F Name and address of principal officer: IRACE FAUL		for subordinates	? Yes X No							
	pendin	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	cluded? Yes No							
<u> 1 T</u>	ax-exe	mpt status: X 501(c)(3) 501(c)( ) (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions							
	Vebsit			H(c) Group exemptio								
K F	K Form of organization: X Corporation Trust Association Other L Year of formation: 1966 M State of legal domicile: WY Part I Summary											
	_	Briefly describe the organization's mission or most significant activities: THE 1	интяот	EST COLLEGE	FOUNDATION							
çe		WILL CONDUCT FUND-RAISING ACTIVITIES AND										
Governance	l .	Check this box if the organization discontinued its operations or dispos										
ver	l			3	26							
	l	Number of independent voting members of the governing body (Part VI, line 1b)			26							
οğ		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			6							
/itie		Total number of volunteers (estimate if necessary)			26							
Activities		Total unrelated business revenue from Part VIII, column (C), line 12			0.							
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.							
				Prior Year	Current Year							
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,241,048.	1,539,743.							
	l	Program service revenue (Part VIII, line 2g)		0.	0.							
Šě		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		4,914,698.	2,975,159.							
_	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		584,139.	676,012.							
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,739,885.	5,190,914.							
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,445,740.	2,163,070.							
	l	Benefits paid to or for members (Part IX, column (A), line 4)		310 630	222 027							
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		310,639.	323,827.							
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  256, 74		0.	0.							
Ä	17D	<del>-</del>		1,218,183.	1,137,464.							
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)  Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,974,562.	3,624,361.							
	l	Revenue less expenses. Subtract line 18 from line 12		1,765,323.	1,566,553.							
		teveride less expenses. Oubtract line to from line 12	Be	ginning of Current Year	End of Year							
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		49,197,318.	54,441,448.							
Ass Bal	21	Fotal liabilities (Part X, line 26)		17,292,303.	18,000,921.							
.et	22	Net assets or fund balances. Subtract line 21 from line 20		31,905,015.	36,440,527.							
	irt II	Signature Block										
Und	er pena	ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is							
true,	correc	, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.								
		O'control of the control of the cont		Date								
Sigi		Signature of officer		Date								
Her	е	TRACE PAUL, TREASURER Type or print name and title										
			Ιr	Date Check	PTIN							
Da! 4		Print/Type preparer's name  Preparer's signature		7/25/24 Check Cif self-employ								
Paid Pron		STEPHANIE R. PICKERING   Firm's name MCGEE, HEARNE & PAIZ, LLP	<sub> </sub> U									
	arer Only	Firm's name MCGEE, HEARNE & PAIZ, LLP Firm's address P.O. BOX 1088	Firm's EIN 8	J UJJI443								
Jac	Jilly	CHEYENNE, WY 82003		Phone no 30	7-634-2151							
May	the IF	S discuss this return with the preparer shown above? See instructions		[ F HORE HO. 5 C	X Yes No							
·viay	uio il	S alcoaco and rotarn with the proparor offown above: Occ methodions			00							

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	BY SECURING AND MANAGING PRIVATE GIFTS, THE NORTHWEST COLLEGE
	FOUNDATION INSPIRES CONFIDENCE, INVOLVEMENT AND FINANCIAL COMMITMENT
	OF ALUMNI, FRIENDS OF THE COLLEGE, AND NWC EMPLOYEES TO FOSTER
	EDUCATIONAL EXCELLENCE FOR NORTHWEST COLLEGE STUDENTS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 \$ 411,715. including grants of \$ 411,715.) (Revenue \$ 676,012.)
	THE FOUNDATION RECEIVES GIFTS OF CASH AND NONCASH ITEMS WITH DESIGNATED
	PURPOSES. THE ITEMS ARE THEN PASSED ON TO THE COLLEGE AS IT MEETS THE
	DESINATED PURPOSE.
	-
4b	(Code:) (Expenses \$ 1,817,648. including grants of \$ 1,751,355. ) (Revenue \$)
1.5	INCOME FROM ENDOWED FUNDS IS GIVEN TO NORTHWEST COLLEGE TO PAY
	SCHOLARSHIPS AND WORK STUDY TO INDIVIDUALS SELECTED BY THE COLLEGE THAT
	MEET DONOR SPECIFICATIONS
4c	(Code:) (Expenses \$
	-
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 2,229,363.
	Form <b>990</b> (2023)

Form 990 (2023) NORTHWEST COLLEGE FOUNDATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		3,7
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		.,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_	37	
	Schedule D, Part III	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?	_		.,
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		37	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			٠,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			Х
	Schedule D, Parts XI and XII	12a		
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	104		х
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	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			
		14b		Х
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		х
20a	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes," complete Schedule I, Parts I and II	21	х	

			Yes	No
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			l
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			,,
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,
	entity (including an employee thereof) 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			,,
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			,,
	"Yes," complete Schedule L, Part IV	28c	37	X
29	Did the organization receive more than \$25,000 in noncash 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			\ <sub>3,7</sub>
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			٠,,
	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		v	
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
р	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<b> </b> ₩
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		v	
07	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			<sub>~</sub>
20	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 on Schedule O for Part VI, lines 11b and 19?	20	х	
Par	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	_ ^	
. ui				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	R	Yes	No
_		_		
b	Enter the Hamber of Fermi W 24 metaded of time Fat Enter of the Applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	Х	
	(gambling) winnings to prize winners?	1c	- 41	

Form 990 (2023)

NORTHWEST COLLEGE FOUNDATION

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	<b>2</b> a	(			
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	37
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•	١.		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	<u>4a</u>		X
D	If "Yes," enter the name of the foreign country	2001104	- (FDAD)			
<b>5</b> 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			E0		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			30		
oa	any contributions that were not tax deductible as charitable contributions?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution					
~	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			0.0		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the pavor?	7a		х
b				7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 889	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file	e a Form 1098-C?	7h		
8	$\textbf{Sponsoring organizations maintaining donor advised funds.} \ \ Did \ a \ donor \ advised \ fund \ maintained$	by the	)			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	ا ــا				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	المما				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	le O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					_
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Form 990 (2023) NORTHWEST COLLEGE FOUNDATION 83-0211067 Page
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 on Schedule O. See instructions.									
_	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management		T							
			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 on Schedule O.									
b										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2	Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			٠.,						
	of officers, directors, trustees, or key employees to a management company or other person?	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?	<u>5</u>		X						
	6 Did the organization have members or stockholders?									
7a				x						
	more members of the governing body?	7a		^						
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			x						
	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b								
8		0-	Х							
	The governing body?  Each committee with authority to act on behalf of the governing body?	8a 8b	X							
ь 9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD	- 21							
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		l							
	(This Section B requests information about policies not required by the internal nevenue code.)		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100								
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b										
12a		12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c		Х						
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	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?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
b	Other officers or key employees of the organization	15b	Х							
	If "Yes" to line 15a or 15b, describe the process on 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									
0	exempt status with respect to such arrangements?	16b								
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed WY									
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)	availal	ole						
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinan	cial							
00	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 DILLON JEFFS - 307-754-6039									
	231 WEST 6TH STREET, POWELL, WY 82435									
	AST THESE SILL SILLELL, LONDLIN, MIL SAISS									

# 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.
- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A)	(B)	(C)					(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	box, unless pe		son is	s both	n an	compensation	compensation	amount of	
	week			u a u	II CCIO	174143	(00)	from	from related	other	
	(list any hours for	directo				_		the organization	organizations (W-2/1099-MISC/	compensation from the	
	related	9e or (	stee			nsated		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	trust	nal tru		эуее	om pe		1099-NEC)	,	and related	
	below	Individual trustee or director	Institutional trustee	ser	Key employee	Highest compensated employee	ner			organizations	
	line)	Indi	Inst	Officer	Key	High	Former				
(1) SHELBY WETZEL	40.00							100 010	2 2 5	00.40=	
EXECUTIVE DIRECTOR				Х				139,918.	3,956.	32,427.	
(2) SHAWN WARNER	0.30	ļ									
PRESIDENT		Х		X				0.	0.	0.	
(3) STEVE ROCKHOLD	0.30	l									
VICE PRESIDENT		Х		X				0.	0.	0.	
(4) TIM HOPKINS	0.30	1								_	
2ND VICE PRESIDENT		Х		X				0.	0.	0.	
(5) SHIRLEY STEPHENS	0.30	1									
SECRETARY		Х		X				0.	0.	0.	
(6) WILLIAM HAYES	0.30								_	_	
ASST. SECRETARY		Х		Х				0.	0.	0.	
(7) TRACE PAUL	0.30	1								_	
TREASURER		Х		X				0.	0.	0.	
(8) BRYAN LEE	0.30								_	_	
ASST. TREASURER		Х		Х				0.	0.	0.	
(9) CAROLYN DANKO	0.30	1								_	
DIRECTOR		Х						0.	0.	0.	
(10) CHARLOTTE PATRICK	0.30	1								_	
DIRECTOR		Х						0.	0.	0.	
(11) CHRISTOPHER TAGGART	0.30								_	_	
DIRECTOR		Х						0.	0.	0.	
(12) CLAY CUMMINS	0.30								_	_	
DIRECTOR		Х						0.	0.	0.	
(13) DAVID BONNER	0.30								_	_	
DIRECTOR		Х						0.	0.	0.	
(14) DAVID NORTHRUP	0.30										
DIRECTOR		Х						0.	0.	0.	
(15) DUSTIN SCHUTZMAN	0.30										
DIRECTOR		Х						0.	0.	0.	
(16) JACQUELINE MICHEL	0.30										
DIRECTOR		Х						0.	0.	0.	
(17) MEGAN NICKLES	0.30										
DIRECTOR		Х						0.	0.	0.	

332007 12-21-23 Form **990** (2023)

Form 990 (2023) NORTHWED.									05 0211	007		aye •
Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,			ghes	t Co	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(do		Pos		<b>ነ</b> than	one	Reportable	Reportable	Es	stimate	∍d
	hours per	box	, unle	ss pe	rson i	is both	n an	compensation	compensation	ar	mount	of
	week	<b>—</b>	Cer ai	luau	recic	Trirus	iee)	from	from related		other	
	(list any hours for	director						the	organizations (W-2/1099-MISC/	ı	npensa rom th	
	related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	l	ganizat	
	organizations	truste	al trus		ee/	m pen		1099-NEC)	100011120)	ı ~	d relat	
	below	Individual trustee or	Institutional trustee	 	Key employee	est co	er	,		l	anizati	
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former					
(18) NADA LARSEN	0.30											
DIRECTOR		Х						0.	0.			0.
(19) NATHAN KEEFER	0.30											
DIRECTOR		Х						0.	0.			0.
(20) R.J. KOST	0.30											
DIRECTOR		Х						0.	0.			0.
(21) RON HILL	0.30											
DIRECTOR		Х						0.	0.			0.
(22) RON WEATHERMON	0.30											
DIRECTOR		Х						0.	0.			0.
(23) SARAH JOHNSON	0.30											
DIRECTOR		Х						0.	0.			0.
(24) STACY BAIR	0.30											
DIRECTOR		Х						0.	0.			0.
(25) STAN LUNDBERG	0.30											
DIRECTOR		Х				_		0.	0.			0.
(26) TYLER YATES	0.30	1							_			
DIRECTOR		Х						0.	0.			0.
1b Subtotal								139,918.	3,956.	3	2,4	
c Total from continuation sheets to Part VI	I, Section A							0.	0.			0.
d Total (add lines 1b and 1c)								139,918.	3,956.	3	2,4	<u> 27.</u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	e) wh	o re	ceived more than \$100,	000 of reportable			_
compensation from the organization												1
											Yes	No
3 Did the organization list any former officer,	director, trust	ee, ł	кеу е	empl	oye	e, or	high	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for s										3		X
•	, 1											
5 The Foot Complete Constant of the Colon Marviada										4	X	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch i	oers	on				5		X
Section B. Independent Contractors		_										
1 Complete this table for your five highest co										tion fr	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin T	the organization's tax y	ear.			

(A) Name and business address NONE	<b>(B)</b> Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than 

Part VII Section A. Officers, Directors, True									83-021	106/
Part VII   Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours			(O Pos	C) ition			<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) WENDY CAPPS	0.30									
DIRECTOR		X						0.	0.	0.
Total to Part VII, Section A, line 1c										

83-0211067

Form 990 (2023)
Part VIII

		Check if Schedule O	conta	ins a respo	nse (	or note to any lin	e in this Part VIII			
						•	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt		Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
S S	1:	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts										
9		Membership dues  Fundraising events								
fts,										
ig ic			tio							
Sir		Government grants (contr								
e ti		All other contributions, gifts,	-			1 539 7/3				
들됨		similar amounts not included				1,539,743.				
o d	•	Noncash contributions included in			•	127,145.	1 520 742			
Og		n Total. Add lines 1a-1f					1,539,743.			
						Business Code				
<u>e</u>	2 8				_					
er v	ŀ	·			_					
S c	(	·			_					
ran Sev	(	d			_					
Program Service Revenue	•	·			_					
<u>م</u>	1	1 3								
	9	Total. Add lines 2a-2f								
	3	Investment income (include	ling d	lividends, ir	itere	st, and				
		other similar amounts)					1,116,788.			1116788.
	4	Income from investment of	f tax-	exempt bo	nd p	roceeds				
	5	Royalties								
				(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
	ŀ	Less: rental expenses	6b							
	(	Rental income or (loss)	6с							
	(	d Net rental income or (loss)	<u></u>							
	7 8	Gross amount from sales of		(i) Securiti	es	(ii) Other				
		assets other than inventory	7a	14,665,3	97.					
	ŀ	Less: cost or other basis								
ē		and sales expenses	7b	12,807,0	26.					
ē			7с	1,858,3	71.					
ther Revenue		d Net gain or (loss)					1,858,371.			1858371.
ē		Gross income from fundraising								
		including \$	-	-						
		contributions reported on								
		Part IV, line 18		-	8a					
	ŀ				8b					
		Net income or (loss) from			ts					
		Gross income from gamin								
		Part IV, line 19	-		9a					
	ı				9b					
		Net income or (loss) from								
		Gross sales of inventory, I			Г					
		and allowances			10a					
		Less: cost of goods sold			10b					
		Net income or (loss) from			_					
-		2 . tot moonto or toog nom	كدادن	JIVOIILOI	,	Business Code				
sn	11 -	ADMINISTRATIVE FEES				561000	496,415.	496,415.		
Miscellaneous Revenue		MISCELLANEOUS			_	900099	179,597.	179,597.		
la Ven		3 112011111111000			_		,,,,,,			
Sce		d All other revenue			_					
Ξ							676,012.			
	12	Total. Add lines 11a-11d  Total revenue. See instruction					5,190,914.	676,012.	0.	2975159.
	./	TOTAL LEVELING, OCC HISHINGH	1112				-,,	1 3,0,014.		

# Form 990 (2023) NORTHWEST COLLEGE FOUNDATION Part IX Statement of Functional Expenses

Check if Schedule Contains a response or note to any line in this Part IX   Check	Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).											
18													
and dromestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Trustees, and key employees Trustees, and key employees Persons described in section 4958(1)(3) and 4958(1)(3)		' '	<b>(A)</b> Total expenses		Management and	Fundraising							
2 Grants and other assistance to domestic inclividuals. See Part IV, line 12 2 3, 554. 3, 554. 3, 554. 3  3 Grants and other assistance to foreign organizations, from June 22 3, 554. 3, 554. 3, 554. 3  4 Benefits paid to or for members of Compensation of Linear Inclined See Part IV, line 15 and 16 learning organizations, from June 22 learning organizations, from June 24 learning organization, from June 24 learning social from June 24 learning soci	1	Grants and other assistance to domestic organizations											
Individuals. See Part V, line 22   3,554.   3,555.   3,		and domestic governments. See Part IV, line 21	2,159,516.	2,159,516.									
3 Grants and other assistance to foreign organizations, foreign powerments, and foreign individuals. See Part IV, lines 15 and 18  4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees To Compensation of current officers, directors, trustees, and key employees and the section of individed above to disqualified persons (seatched) and a section 4858(f)(19) and persons described in section 4958(f)(19) and 413(f) employer contributions (include section 401(f) and 413(f) employer contributions) 9 Other employee benefits 10 Payrotit taxes 11 Fees for services (honoemployees): 12 Algorithm 496, 437. 14 Legal	2	Grants and other assistance to domestic											
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16   8   8   8   171,101   34,220   51,330   85,551   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   171,101   34,220   34,220   34,220   34,220   34,220   34,220   34,220   34,220   3		individuals. See Part IV, line 22	3,554.	3,554.									
Individuals, See Part IV, lines 15 and 16	3	Grants and other assistance to foreign											
Benefits paid to or for members   171 , 101		organizations, foreign governments, and foreign											
171,101.   34,220.   51,330.   85,551.		individuals. See Part IV, lines 15 and 16											
171,101.   34,220.   51,330.   85,551.	4												
6 Compensation not included above to disqualified persons (as defined under section 4958()(3)(8) 7 Other salaries and wages 8 Pension plan acruals and contributions (include section 490()(3)(8) and 490()) employer contributions (include section 490()(3) and 490()) employer contributions (include section 490()(3) and 490()) employer contributions (include section 490()(3) and 490()) employer contributions (include section 490() and 490()) employer contributions (include section 490()) and 490() and 490	5												
6 Compensation not included above to disqualified persons (as cliribed under section 4988(c)(3)(8)  7 Other salaries and wages  8 Pension plan acrualis and contributions (include section 4981(c)) and another section 4981(c) (1)) and persons described in section 4988(c)(3)(8)  9 Pension plan acrualis and contributions (include section 401(k) and 493(b) employer contributions)  10 Payroll taxes  11 Fees for services (nonemployees):  12 Management  13 Management  14 96 , 437 .  14 96 , 437 .  14 96 , 437 .  14 96 , 437 .  14 984 .  14 0 Lobbying  Professional fundraising services. See Part IV, line 17 Investment management fees  9 Other: (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 19 genesies on Sch 0.)  13 Office expenses  15 Payments of travel or entertainment expenses for any federal, state, or local public officials  16 Cocupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  10 Payments of travel or entertainment expenses  11 Payments of travel or entertainment expenses  12 Payments of travel or entertainment expenses  13 Payments of travel or entertainment expenses  14 Payments of travel or entertainment expenses  15 Payments of travel or entertainment expenses  16 Payments of travel or entertainment expenses  17 Payments of travel or entertainment expenses  18 Payments of travel or entertainment expenses  1		trustees, and key employees	171,101.	34,220.	51,330.	85,551.							
Person of wages   124,687.   24,937.   37,406.   62,344.	6												
124,687. 24,937. 37,406. 62,344.		persons (as defined under section 4958(f)(1)) and											
Pension plan accruals and contributions (include section 40 (ik) and 403(h) employer contributions (ik) and a section 40 (ik) and 403(h) employer contributions (ik) and a section 40 (ik) and a se		persons described in section 4958(c)(3)(B)											
8	7	Other salaries and wages	124,687.	24,937.	37,406.	62,344.							
9 Other employee benefits	8												
9 Other employee benefits		section 401(k) and 403(b) employer contributions)											
10   Payroll taxes	9		28,039.	5,608.	8,412.	14,019.							
11   Fees for services (nonemployees):   a   Management	10	Payroll taxes				_							
C   Accounting   C	11												
C   Accounting   C	а	Management	496,437.		496,437.								
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)  2 Advertising and promotion 3 Office expenses Information technology 5 Royalties 6 Occupancy 7 Travel 6 Occupancy 7 Travel 7 Travel 7 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 15 Insurance 16 Other expenses. Itemize expenses on tine 24e. If line 24e amount exceeds 10% of line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 18 DEVELOPMENT ACTIVITIES 18 REAL PROPERTY EXPENSE 20 REAL PROPERTY EXPENSE 30 All other expenses 40 Interest 41 All other expenses 51 Total functional expenses. Add lines 1 through 24e 51 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	b	Legal			1,230.								
e Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)  2 Advertising and promotion  3 Office expenses  6 4, 341. 25, 736. 38, 605.  4 Information technology  5 Royalties  6 Occupancy  7 Travel 6, 000. 3, 000. 3, 000.  8 Payments of travel or entertainment expenses for any federal, state, or local public officials  9 Conferences, conventions, and meetings  10 Interest  11 Payments to affiliates  22 Depreciation, depletion, and amortization  15, 276. 1, 528. 10, 693. 3, 055.  18 Insurance  20 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  18 PEALL PROPERTY EXPENSE  18, 320. 18, 320. 18, 320. 18, 320. 19, 972. 19, 975	С	Accounting	24,984.		24,984.								
Travel	d												
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)  2 Advertising and promotion 3 Office expenses 6 4 , 341. 25 , 736. 38 , 605.  14 Information technology 15 Royalties 16 Occupancy 17 Travel 6 , 000. 3 , 000. 3 , 000.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 20 Depreciation, depletion, and amortization Insurance 21 Other expenses. Itemize expenses on to covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schoolub (J. St. 1)    25 PRINTING 26 PRINTING 37 OKA 1	е		445 500		445 500								
Column (A), amount, list line 11g expenses on Sch 0.)   Advertising and promotion   Column (A), amount, list line 11g expenses   64 , 341 .			447,789.		447,789.								
12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Office expenses Itemize expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 2 DEVELOPMENT ACTIVITIES 2 REAL PROPERTY EXPENSE 3 REAL PROPERTY EXPENSE 4 MISCELLANEOUS 5 PRINTING 6 6,573. 4 4,601. 7 1,972. 7 MISCELLANEOUS 6 All other expenses. Add lines 1 through 24e 5 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	g	, -											
13													
14			C 4 2 4 1		25 726	20 605							
15   Royalties			64,341.		25,/36.	38,605.							
16 Occupancy         6,000.         3,000.         3,000.           17 Travel         6,000.         3,000.         3,000.           18 Payments of travel or entertainment expenses for any federal, state, or local public officials         9         10           19 Conferences, conventions, and meetings         10         10           20 Interest         21         Payments to affiliates         22           22 Depreciation, depletion, and amortization Insurance         15,276.         1,528.         10,693.         3,055.           23 Insurance         10         15,276.         1,528.         10,693.         3,055.           24 Other expenses Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule (J), amount, list line 24e expenses on Schedule													
17 Travel 6,000. 3,000. 3,000.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Other expenses in the conference of the confe													
18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings			6 000		3 000	3 000							
for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  a DEVELOPMENT ACTIVITIES b REAL PROPERTY EXPENSE c PRINTING d MISCELLANEOUS e All other expenses  1 1, 382. 2 138. 2 1, 244. 25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			0,000.		3,000.	3,000.							
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  a DEVELOPMENT ACTIVITIES b 52,176. 5,218. 46,958. b REAL PROPERTY EXPENSE 18,320. 18,320. c PRINTING 6,573. 4,601. 1,972. d MISCELLANEOUS 2,956. 2,956. e All other expenses 11,382. 138. 1,244. 25 Total functional expenses. Add lines 1 through 24e 24e. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	18												
20 Interest	10					_							
Payments to affiliates   Depreciation, depletion, and amortization   15,276													
Depreciation, depletion, and amortization   15,276.   1,528.   10,693.   3,055.						_							
23   Insurance			15,276.	1,528.	10,693.	3,055.							
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  a DEVELOPMENT ACTIVITIES b REAL PROPERTY EXPENSE c PRINTING d MISCELLANEOUS e All other expenses  1 1,382.  1 138.  1 1,244.  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	23												
Inite 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)   a   DEVELOPMENT ACTIVITIES   52,176.   5,218.   46,958.     b   REAL PROPERTY EXPENSE   18,320.   18,320.     c   PRINTING   6,573.   4,601.   1,972.     d   MISCELLANEOUS   2,956.   2,956.     e   All other expenses   1,382.   138.   1,244.     25   Total functional expenses. Add lines 1 through 24e   3,624,361.   2,229,363.   1,138,250.   256,748.     26   Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	24	Other expenses. Itemize expenses not covered											
DEVELOPMENT ACTIVITIES   52,176.   5,218.   46,958.		line 24e amount exceeds 10% of line 25, column (A),											
b REAL PROPERTY EXPENSE         18,320.           c PRINTING         6,573.         4,601.         1,972.           d MISCELLANEOUS         2,956.         2,956.           e All other expenses         1,382.         138.         1,244.           25 Total functional expenses. Add lines 1 through 24e         3,624,361.         2,229,363.         1,138,250.         256,748.           26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.         2,229,363.         1,138,250.         256,748.	_		52 176		5 218	46 958							
c PRINTING         6,573.         4,601.         1,972.           d MISCELLANEOUS         2,956.         2,956.           e All other expenses         1,382.         138.         1,244.           25 Total functional expenses. Add lines 1 through 24e         3,624,361.         2,229,363.         1,138,250.         256,748.           26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.         2,229,363.         1,138,250.         256,748.	a h		18.320.			±0,750+							
MISCELLANEOUS  e All other expenses  Total functional expenses. Add lines 1 through 24e  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						1.972.							
All other expenses 1,382. 138. 1,244.  Total functional expenses. Add lines 1 through 24e 3,624,361. 2,229,363. 1,138,250. 256,748.  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	d												
Total functional expenses. Add lines 1 through 24e  3,624,361. 2,229,363. 1,138,250. 256,748.  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	_					1,244.							
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				2,229,363.									
educational campaign and fundraising solicitation.		Joint costs. Complete this line only if the organization											
		reported in column (B) joint costs from a combined											
Check here if following SOP 98-2 (ASC 958-720)													
5 000 (2000)		Check here if following SOP 98-2 (ASC 958-720)											

Form 990 (2023)
Part X Balance Sheet

Par	<u> t X</u>	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			161,676.	1	524,886.
	2	Savings and temporary cash investments				2	850,711.
	3	Pledges and grants receivable, net			319,984.	3	616,604.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial o	contributor, or 35%			
		controlled entity or family member of any of the	ese pers	ons		5	
	6	Loans and other receivables from other disqua	lified per				
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
<u>s</u>	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9					9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	732,068.			
	b	Less: accumulated depreciation		<u> </u>	511,985.	10c	703,067.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			45,850,632.	12	51,039,798.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			2,353,041.	15	706,382.
	16	Total assets. Add lines 1 through 15 (must eq	ual line 3	33)	49,197,318.	16	54,441,448.
	17	Accounts payable and accrued expenses	43,080.	17	967,052.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		1		20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
-iak		controlled entity or family member of any of the	-	F		22	
_	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p	•				
		parties, and other liabilities not included on line	•	· .	17,249,223.	05	17,033,869.
	00	of Schedule D			17,292,303.	26	18,000,921.
	26	Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, ch			11,232,303.	26	10,000,921.
S		and complete lines 27, 28, 32, and 33.	eck ner	e 21			
nce	27	Net assets without donor restrictions			306,994.	27	537,557.
3ala	28	Net assets with donor restrictions			31,598,021.	28	35,902,970.
J E	20	Organizations that do not follow FASB ASC			31/330/0211		33730273701
Fur		and complete lines 29 through 33.	000, 0110				
ō	29	Capital stock or trust principal, or current funds	s			29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			31,905,015.	32	36,440,527.
~	33	Total liabilities and net assets/fund balances		1	49,197,318.	33	54,441,448.
					-,,		Farra 990 (0000)

Form **990** (2023)

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

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,19		
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>3,62</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>1,56</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		1,90		
5	Net unrealized gains (losses) on investments	5		2,93	<u>0,1</u>	75.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		3	8,7	84.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	3	6,44	0.5	27.
Pa	rt XII Financial Statements and Reporting	10		<del>- ,</del>	- , -	
	Check if Schedule O contains a response or note to any line in this Part XII					
	oneskii osiisaale o sontaine a response si nete te ary iine iir tine r at Air				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on School	edule C	).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					

Form **990** (2023)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Open to Public

**Employer identification number** 

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

Inspection

OMB No. 1545-0047

NORTHWEST COLLEGE FOUNDATION 83-0211067 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: X 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1157399.	680,501.	4275662.	1241048.	1539743.	8894353.	
2	Tax revenues levied for the organ-							
	ization'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	203,743.	211,600.	169,950.	159,545.	159,053.	903,891.	
4	Total. Add lines 1 through 3	1361142.	892,101.	4445612.	1400593.	1698796.	9798244.	
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)						2639932.	
6	Public support. Subtract line 5 from line 4.						7158312.	
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
7	Amounts from line 4	1361142.	892,101.	4445612.	1400593.	1698796.	9798244.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	1133784.	1253983.	1236587.	1190601.	1111984.	5926939.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)	480,629.	511,531.	545,126.	573,415.	676,012.	2786713.	
11	<b>Total support.</b> Add lines 7 through 10						18511896.	
12	Gross receipts from related activities,	etc. (see instructio	ns)			12		
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)		
	organization, check this box and stop	here						
Sec	tion C. Computation of Publi	c Support Per	centage					
14	Public support percentage for 2023 (li	ne 6, column (f), di	vided by line 11, c	olumn (f))		14	38.67 %	
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	36.12 %	
16a	33 1/3% support test - 2023. If the o	rganization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box		
	stop here. The organization qualifies as a publicly supported organization							
b	b 33 1/3% support test - 2022. 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							
17a	a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	meets the facts-and-circumstances te	ū		,				
b	10% -facts-and-circumstances test	_					10% or	
	more, and if the organization meets the				-			
	organization meets the facts-and-circu			. ,	•			
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	·	

## 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.)

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		,	T	_		
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	-			•		
C-	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2023 (I	, (,,		(//		15	%
	Public support percentage from 2022 ction D. Computation of Inves					16	%
				10 l (f)		47	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	%
198	a 33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2022. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	ni dia not check a	box on line 14, 19a	a, or 190, check th	iis box and see ins	structions	

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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.
- 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 lines 3b and 3c 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")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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
	163	NO
4		
1		
_		
2		
3a		
3b		
3с		
4a		
4b		
4-		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
٥h		
9b		
0		
9с		
10a		
10b		

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	1.10		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the	1		
2	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,			
Sec	supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations	2		
000	tion of Type it oupporting organizations		.,	· ·
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). stion D. All Type III Supporting Organizations	1		
360	tion b. All Type III Supporting Organizations			l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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			
0	supported organizations played in this regard.	3		
Sec	tion 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)	)-		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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? If "Yes" or "No" provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Vas " describe in Part VI the role played by the organization in this regard	3b		

Sche	dule A (Form 990) 2023 NOR'THWEST COLLEGE FOUND			33-0211067 Page <b>6</b>
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g 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.	
Sect	ion 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		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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		

\_\_\_ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ıed)	o ollifor Tage T
	ion D - Distributions	1 / / / · · · · · · · · · · · · · · · ·	Contine	100)	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	04
2	Amounts paid to perform activity that directly furthers exemp	<u> </u>			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8_	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				

Schedule A (Form 990) 2023

e Excess from 2023

#### Schedule B

(Form 990)

### **Schedule of Contributors**

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization

NORTHWEST COLLEGE FOUNDATION

Employer identification number

83-0211067

Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization Employer identification number

# NORTHWEST COLLEGE FOUNDATION

83-0211067

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	NWC STUDENT SENATE  231 W 6TH STREET  POWELL, WY 82435	\$35,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	BEVERLY AND GREGG PETERSON  7543 LOMA VISTA RD  VENTURA, CA 93003-2569	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	BOB AND JEANNA KENNEDY PO BOX 578 CODY, WY 82414-0578	\$ 60,000.	Person X Payroll		
(a)	(b)	(c)	(d)		
No4_	Name, address, and ZIP + 4  CAROL MCCAULEY  633 SAWTOOTH ST  POWELL, WY 82435-1758	\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5	LOREN EVANS  1405 E 25TH ST  IDAHO FALLS, ID 83404-6214	\$31,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)		

Name of organization Employer identification number

# NORTHWEST COLLEGE FOUNDATION

83-0211067

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	LAND		
_2			
		<u> </u>	08/31/23
(a)		(c)	
No. rom	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
art I		(See instructions.)	
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		_	
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		_	
		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		_	
		\$	
(a)	-	(c)	
No. rom	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
art I	2000. paon or nonouou proporty given	(See instructions.)	2410 10001100

Name of organization Employer identification number

	EST COLLEGE FOUNDATION			83-0211067				
rt III	Exclusively religious, charitable, etc., contributi	ons to organizations described in s	ection 501(c)(7), (8), or (10) th	at total more than \$1,000 for the ye				
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	through (e) and the following line er	itry. For organizations	.noo.) \$				
	Use duplicate copies of Part III if additional	snace is needed	less for the year. (Enter this into. o	ince.) +				
No	Osc duplicate copies of Fart III II additional	T Treeded.						
No.	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
rt I	(a) i di podo di giit	(0, 000 0. g	(4) 2000					
_								
			<del></del>   <del></del>					
$\vdash$								
		(e) Transfer of g	ift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
No. om								
rt I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held				
		-						
— I								
	(e) Transfer of gift							
	(e) Italiaid of gilt							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
	-							
No		<u> </u>						
No. om	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
rt I	(, p : 3	(1, 111 11 3.11	(-7	(.,				
			<del></del>					
$\vdash$								
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
	•		<u> </u>					
No. om rt I								
m + 1	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
• +		1						
		l <del></del>	<del></del>					
_								
-								
-								
_		(a) Transfer of a						
_		(e) Transfer of g	l ift					
_								
	Transferee's name, address, a			nsferor to transferee				

## **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 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

NORTHWEST COLLEGE FOUNDATION

**Employer identification number** 83-0211067

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(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 w	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors 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
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
_	Total number of conservation easements		
b			
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acquir	• • •	
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year	annount in Innoted	
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the periodications and enforcement of the generalistic assembly it.		
6	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landing of violations, and emorcing con-	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	ation easements during the year
-	3, 3,		
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservatio		
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or research in fu	urtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these item	ns.
b	If the organization elected, as permitted under FASB ASC 958	3, 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 furth	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
			\$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS	_	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2023

703,067.

e Other

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

Schedule D (Form 990) 2023 NORTHWEST CO	LLEGE FOUNDAT	ION 83	-0211067 Page <b>3</b>
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. 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) MARKETABLE SECURITIES	51,039,798.	END-OF-YEAR MARKET	VALUE
(B)	, ,		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	51,039,798.		
Part VIII Investments - Program Related.	32/005//501		
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-vear market value
	(L) Don value	(c) memora en variadirem e cercer en ene	or your marker raide
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (Col. /h) must equal Form 000 Port V. line 12 col. /P))			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))  Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990 Part IV line 1	1d See Form 990 Part X line 15	
	Description	Td. See Form 930, Fart X, line 13.	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.  Part X   Other Liabilities	(B))		
		1 11f C F 000 Dest V line 05	
Complete if the organization answered "Yes" of	on Form 990, Part IV, IINE 1	Te or TH. See Form 990, Part X, Ilne 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	MING		
	MING -		16 062 702
(3) CHALLENGE GRANT	T M 7		16,063,783.
(4) PRESENT VALUE OF GIFT ANNU	T.T.X		10 (15
(5) OBLIGATIONS	DA DV		19,615.

(3) CHALLENGE GRANT
(4) PRESENT VALUE OF GIFT ANNUITY
(5) OBLIGATIONS
(6) THE BOYS & GIRLS CLUB OF PARK
(7) COUNTY WYOMING
(8)
(9)

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

16,063,783.

19,615.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR

LOCAL TAX AUTHORITIES EXCEPT FOR THE LAST THREE YEARS FILED.

Schedule D (Form 990) 2023

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

NORTHWEST	COLLEGE	FOUNDATION					83-0211067
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assis	stance?						Yes X No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$		1	<del>-</del>		(f) Method of		Т
Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
NORTHWEST COLLEGE							
231 W. 6TH STREET							
POWELL, WY 82435	83-6001133	501(C)(3)	1,751,355.	0.			SCHOLARSHIPS
·			, ,				
NORTHWEST COLLEGE							
231 W. 6TH STREET							PROGRAM SUPPORT FOR
POWELL, WY 82435	83-6001133	501(C)(3)	408,161.	0.			COLLEGE
2 Enter total number of section 501(c)(3) as	nd government ord	ganizations listed in th	e line 1 table		<u> </u>		
3 Enter total number of other organizations	-						

### **SCHEDULE J** (Form 990)

**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 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NORTHWEST COLLEGE FOUNDATION

Employer identification number 83-0211067

Pa	art I Questions Regarding Compensation			
	·	١	res	No
<b>1</b> a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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	b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
		2		
3	Indicate which, if any, of the following the 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.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	a		_X_
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	с	_	_X_
	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:			v
		a	-	<u> </u>
D	, , ,	b		
6	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		Х
		b		X
D	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			
'		7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	+		
3		3		Х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III  If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•		9		

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

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SHELBY WETZEL	(i)	139,918.	0.	0.	0.	31,183.	171,101.	0.
EXECUTIVE DIRECTOR	(ii)	3,956.	0.	0.	0.	1,244.	5,200.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

2023

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Inspection
Employer identification number

	NORTHWEST CO	83-0211067					
Pa	t 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 de noncash contribu	termining	nts
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	X	1	125,000.			
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ( OTHER NON CASH )	X	6	1,175.			
26	Other ( GIFT CARDS )	X	4	720.			
27	Other ( GOLF CLUBS )	X	1	250.			
28	Other ( )						
29	Number of Forms 8283 received by the organization			I I			
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement <b>29</b>			
						Ye	s No
30a	During the year, did the organization receive by			· · · · · · · · · · · · · · · · · · ·			
	must hold for at least 3 years from the date of t						
	exempt purposes for the entire holding period?					30a	<u> </u>
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contributi	ons?	31	<u> </u>
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

Schedule M (Form 990) 2023

## **SCHEDULE 0** (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NORTHWEST COLLEGE FOUNDATION

**Employer identification number** 83-0211067

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
SUPPORT NORTHWEST COLLEGE AND ITS STUDENTS.	
FORM 990, PART VI, SECTION A, LINE 2:	
DAVE BONNER (DIRECTOR) IS THE FATHER OF SHELBY WETZEL (EXECUTIVE D	IRECTOR).
FORM 990, PART VI, SECTION B, LINE 11B:	
990 IS REVIEWED BY THE BOARD PRIOR TO IT'S FILING.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE EXECUTIVE DIRECTOR'S WAGES ARE APPROVED BY THE BOARD OF DIRECT	ORS AFTER
COMPARATIVE STUDIES ARE COMPLETED. ALL OTHER WAGES ARE APPROVED B	Y
NORTHWEST COLLEGE AFTER COMPARATIVE STUDIES ARE COMPLETED.	
FORM 990, PART VI, SECTION C, LINE 19:	
ALL PUBLIC DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN LIABILITIES ASSOCIATED WITH CHARITABLE GIFT	
ANNUITIES	9,609.
CHANGE IN VALUE - BENEFICIAL INTEREST IN PERPETUAL TRUSTS	29,175.
TOTAL TO FORM 990, PART XI, LINE 9	38,784.

#### **SCHEDULE R** (Form 990)

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization 83-0211067 NORTHWEST COLLEGE FOUNDATION Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlling entity

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

(a)  Name, address, and EIN  of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
NORTHWEST COLLEGE - 83-6001133							
231 WEST 6TH STREET							
POWELL, WY 82435	EDUCATION	WYOMING	501(C)(3)	2			Х

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

		0 11 17 11 11 11	"'' " " " " " " " " " " " " " " " " " "	D . N . F . O .		
David 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
Part III	organizations treated as a partnership during the tax year.		,	,		

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec	i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		tion b)(13) rolled tity?
		couritry)						Yes	No

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

Yes No

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

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>b</b> Gift, grant, or capital contribution to related organization(s)				1b	Х			
c Gift, grant, or capital contribution from related organization(s)				1c		_X_		
d Loans or loan guarantees to or for related organization(s)				1d		_X_		
e Loans or loan guarantees by related organization(s)				1e		<u>X</u>		
f Dividends from related organization(s)				1f		<u>X</u>		
g Sale of assets to related organization(s)				1g		X		
h Purchase of assets from related organization(s)				1h 1i		X		
i Exchange of assets with related organization(s)								
j Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_		
				41.		X		
k Lease of facilities, equipment, or other assets from related organization(s)				1k 1l		X		
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)								
<ul> <li>n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)</li> <li>o Sharing of paid employees with related organization(s)</li> </ul>								
O Chairing of paid employees with related organization(s)				10	Х			
p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses				1q		X		
•								
r Other transfer of cash or property to related organization(s)				1r		X		
s Other transfer of cash or property from related organization(s)				1s		X		
2 If the answer to any of the above is "Yes," see the instructions for information on	who must complete th	nis line, including covered relati	onships and transaction thresholds.					
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved				
	type (a s)							
(1) NORTHWEST COLLEGE	В	2,159,533.						
(2) NORTHWEST COLLEGE	0	478,504.						
(3)								
(4)								
(5)								
(6)								
				_ /-				

#### 2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

	O TAGE TO							220							
Asset No.	Description	Date Acquired	Method	Life	C o n v	_ine No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
	NELSON HOUSE (550 COLLEGE														
4	DRIVE)	01/01/22	SL	27.50	MM1	L 6	157,000.				157,000.	5,709.		5,709.	11,418.
							,				,	,		,	,
5	NELSON HOUSE FLOORING	06/01/22	SL	27.50	MM1	L 6	10,989.				10,989.	233.		400.	633.
	NELSON HOUSE BATHROOM														
6	RENOVATION	09/01/22	SL	27.50	MM 1	L6	9,326.				9,326.	113.		339.	452.
	NELSON HOUSE GENERAL														
7	IMPROVEMENTS	09/01/22	SL	27.50	MM 1	L6	47,776.				47,776.	579.		1,737.	2,316.
	NOTT HOUSE (560 COLLEGE														
8	DRIVE)	01/01/22	SL	27.50	MM1	L6	194,999.				194,999.	7,091.		7,091.	14,182.
	* 990 PAGE 10 TOTAL														
	BUILDINGS						420,090.				420,090.	13,725.		15,276.	29,001.
	LAND														
9	HART FARM LAND	01/01/22	L				85,900.				85,900.			0.	
10	KREPS LAND	01/01/22	L				27,154.				27,154.			0.	
11	MITOND GOM I AND	01 /01 /02					70 467				70 467			0.	
11	THOMPSON LAND	01/01/22	ь				78,467.				78,467.			0.	
14	CODY LAND	08/31/23	L				125,000.				125,000.			0.	
							,				,				
	* 990 PAGE 10 TOTAL LAND						316,521.				316,521.	0.		0.	0.
	OTHER														
1.0		01 /01 /55		000			110 000				110 000				
12	BIRD COLLECTION - ARTWORK	01/01/22		.000	HY1	L6	110,000.				110,000.			0.	
13	FILLERUP PAINTINGS	01/01/22		.000	HY1	16	16,760.				16,760.			0.	
		01,01,22					20,700.								
	* 990 PAGE 10 TOTAL OTHER						126,760.				126,760.	0.		0.	0.
	* GRAND TOTAL 990 PAGE 10						,								
	DEPR						863,371.				863,371.	13,725.		15,276.	29,001.

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						738,371.			0.	738,371.	13,725.			29,001.
	ACQUISITIONS						125,000.			0.	125,000.	0.			0.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						863,371.			0.	863,371.	13,725.			29,001.
	ENDING ACCUM DEPR											29,001.			
	ENDING BOOK VALUE											834,370.			