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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2011</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012		D Employer identification number 41-1556013	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NORTHWEST MINNESOTA FOUNDATION Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 4225 TECHNOLOGY DR NW City or town, state or country, and ZIP + 4 BEMIDJI, MN 56601		E Telephone number (218) 759-2057
		G Gross receipts \$ 14,809,439	
F Name and address of principal officer NANCY VYSKOCIL 4225 TECHNOLOGY DR NW BEMIDJI, MN 56601		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ NWMF.ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1986	M State of legal domicile MN

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE NORTHWEST MN FOUNDATION INVESTS RESOURCES, CREATES OPPORTUNITIES, AND PROMOTES PHILANTHROPY TO MAKE THE REGION A BETTER PLACE TO LIVE AND WORK		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	21
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	3,711,159	3,239,485
	9 Program service revenue (Part VIII, line 2g)	472,576	422,799
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,416,135	2,164,318
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,599,870	5,826,602
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,590,737	1,788,505
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,400,686	1,481,314
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>148,920</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,435,454	1,066,948
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,426,877	4,336,767
	19 Revenue less expenses Subtract line 18 from line 12	1,172,993	1,489,835
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	47,055,555	48,212,224
	21 Total liabilities (Part X, line 26)	4,159,284	4,365,928
	22 Net assets or fund balances Subtract line 21 from line 20	42,896,271	43,846,296

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

Sign Here	***** Signature of officer			2012-11-26 Date	
	NANCY VYSKOCIL PRESIDENT Type or print name and title				
Paid Preparer's Use Only	Preparer's signature  JEFF HAUKEBO		Date	Check if self-employed 	Preparer's taxpayer identification number (see instructions) P00055507
	Firm's name (or yours if self-employed), address, and ZIP + 4  MILLER MCDONALD ERICKSON & MOLLER LTD PO BOX 486 BEMIDJI, MN 566190486		EIN  41-1281737		
			Phone no  (218) 751-6300		

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE NORTHWEST MINNESOTA FOUNDATION INVESTS RESOURCES, CREATES OPPORTUNITIES, AND PROMOTES PHILANTHROPY
TO MAKE THE REGION A BETTER PLACE TO LIVE AND WORK

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code)	Expenses \$	3,431,967	including grants of \$	1,781,053)	(Revenue \$	422,799
	<p>STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS</p> <p>A) TRAINING AND EDUCATION THE FOUNDATION IS COMMITTED TO STRENGTHENING THE ABILITY OF THE REGION'S COMMUNITIES AND ORGANIZATIONS TO CONFRONT PROBLEMS AND ISSUES WITH GOOD DECISION-MAKING SKILLS. THE FOUNDATION BELIEVES THAT SKILLED LEADERSHIP IS ESSENTIAL TO ENSURE THAT PEOPLE RETAIN THE ABILITY TO CREATE A BRIGHT FUTURE FOR THE AREA, AS LEADERSHIP IS A KEY INGREDIENT IN IMPLEMENTING CONSTRUCTIVE CHANGE. (CONTINUED ON SCHEDULE O) A TOTAL OF \$703,619 WAS SPENT FOR TRAINING AND EDUCATION IN FY 2012 AND INCLUDED THE FOLLOWING ACTIVITIES: ANNUAL OUTSTANDING LEADERSHIP AWARDS WITH GRANTS WERE PRESENTED TO A LEADERSHIP TRAINING PARTICIPANT DEMONSTRATING INCREASED COMMUNITY LEADERSHIP AND A NON-PROFIT ORGANIZATION SHOWING IMPACT DUE TO QUALITY MANAGEMENT. THREE TWO-DAY, ONE-NIGHT ELEMENTARY AND MIDDLE SCHOOL YOUTH LEADERSHIP SESSIONS WERE HELD IN THE FALL OF 2011 WITH 250 PARTICIPANTS. THESE SAME PARTICIPANTS RETURNED IN THE WINTER FOR TWO TWO-DAY, ONE-NIGHT SESSIONS. A SERIES OF ELEVEN WORKSHOPS FOR NON-PROFIT MIDDLE-MANAGEMENT AND ABOVE WERE DELIVERED. OVERALL, THERE WERE 263 PARTICIPANTS. TWO ORGANIZATIONAL ASSESSMENTS WERE CONDUCTED THAT WILL ALLOW THESE PARTICIPATING ORGANIZATIONS TO ACCESS TECHNICAL ASSISTANCE GRANTS. AN ADDITIONAL ELEVEN NON-PROFITS RECEIVED TECHNICAL ASSISTANCE. LEADERIMPACT TRAINING WAS DELIVERED TO TWENTY-THREE PARTICIPANTS IN FY 2012. THIS REPRESENTS ONE PROGRAM CONSISTING OF TWO RETREATS SEPARATED BY THREE MONTHS DURING WHICH EACH PARTICIPANT RECEIVES PROFESSIONAL COACHING. THIRTY-NINE LEADERIMPACT ALUMNI ATTENDED A FOLLOW-UP SESSION. TECHNICAL ASSISTANCE IS AVAILABLE TO HELP ENTREPRENEURS UNDERSTAND THEIR STRENGTHS AND NEEDS IN ESTABLISHING OR EXPANDING A SELF-EMPLOYMENT OPPORTUNITY. INDIVIDUAL TRAINING WAS PROVIDED THROUGHOUT THE REGION. ADDITIONAL SUPPORT WAS PROVIDED TO ECONOMIC CONFERENCES AND TRAINING PROGRAMS IN THE REGION.</p> <p>B) GRANTS GRANT PROGRAMS HAVE BEEN ESTABLISHED PROVIDING FLEXIBILITY TO NONPROFIT ORGANIZATIONS AND PUBLIC AGENCIES AS THEY ADDRESS ORGANIZATIONAL, COMMUNITY AND REGIONAL ISSUES. EACH PROGRAM HAS ITS OWN SET OF PRIORITIES, ELIGIBILITY AND REVIEW PROCESS. A TOTAL OF \$1,084,886 WAS AWARDED FOR GRANT PROGRAMS IN FY 2012 AND INCLUDED THE FOLLOWING: FORTY-SIX GRANTS TOTALING \$40,162 WERE AWARDED FOR CONTINUING SUPPORT OF SMALL BUSINESSES TO RECEIVE ASSISTANCE WITH BUSINESS MANAGEMENT TECHNIQUES. GRANTS ARE MADE TO PROMOTE, PRESERVE OR ADD VALUE TO THE REGION'S NATURAL RESOURCE BASE. TWO GRANTS TOTALING \$28,750 FOR RESEARCH AND FOUR GRANTS TOTALING \$45,368 FOR PROMOTION AND PRESERVATION WERE AWARDED UNDER THIS PROGRAM. THREE GRANTS TOTALING \$49,540 WERE AWARDED FOR JOINT VENTURES THAT SPECIFICALLY ADDRESS THE NEEDS OF CHILDREN, FAMILIES AND THE ELDERLY. AS PART OF THE FOUNDATION'S COMMITMENT TO STRENGTHEN THE CAPACITY OF INDIVIDUALS, ORGANIZATIONS AND COMMUNITIES TO SHAPE THEIR FUTURE, WE ADMINISTER COMPONENT FUNDS TO ASSIST COMMUNITIES AND NONPROFIT AGENCIES IN BUILDING THEIR RESOURCES. THERE WERE 314 COMPONENT FUNDS UNDER THIS PROGRAM. A TOTAL OF 216 GRANTS AND SCHOLARSHIPS TOTALING \$767,816 WERE AWARDED IN FY 2012. ONE GRANT TOTALING \$1,000 WAS AWARDED FOR THE DEVELOPMENT AND IMPLEMENTATION OF PLANS TO MANAGE GROWTH AND CONTROL DEVELOPMENT WITHIN COMMUNITIES. NINE GRANTS TOTALING \$86,000 WERE AWARDED TO LOCAL GOVERNMENTS FOR COMMUNITY AND ECONOMIC DEVELOPMENT. ONE GRANT TOTALING \$24,000 WAS AWARDED UNDER A PROGRAM TO HELP ORGANIZATIONS DEVELOP NEW NETWORKS, FOSTER COALITION BUILDING, AND PROMOTE COLLABORATIONS BETWEEN HUMAN SERVICE PROVIDERS, OTHER ORGANIZATIONS, AND/OR PUBLIC AGENCIES. SEVEN GRANTS TOTALING \$52,000 WERE AWARDED UNDER THE IDEA (INGENUITY DRIVES ENTREPRENEUR ACCELERATION) PROGRAM, WHICH ASSISTS PROMISING LOCAL ENTREPRENEURS IN THE COMMERCIALIZATION OF INNOVATIVE PRODUCTS, PROCESSES AND DELIVERIES BY CONNECTING THEM TO THE BEST RESOURCES AVAILABLE. ONE GRANT TOTALING \$1,000 WAS AWARDED UNDER THE SUSTAINING COMMUNITY SUCCESS TECHNICAL ASSISTANT PROGRAM. THIS PROGRAM FOR COMPONENT FUNDS HAS A TRAINING COMPONENT CONSISTING OF FOUR WORKSHOPS DESIGNED FOR FUND ADVISORY GROUPS: STRATEGIC PLANNING, MARKETING, FUND DEVELOPMENT AND CREATING A LEGACY (GRANTMAKING AND DONOR STEWARDSHIP). IT IS ACCOMPANIED BY INDIVIDUAL TECHNICAL ASSISTANCE IN EACH AREA. A TOTAL OF \$10,750 IN PREVIOUSLY AWARDED GRANTS WAS RESCINDED.</p> <p>C) BUSINESS DEVELOPMENT THE FOUNDATION IS COMMITTED TO IMPROVING THE QUALITY OF LIFE IN THE NORTHWEST REGION OF MINNESOTA AS A PART OF THAT MISSION. SEVERAL BUSINESS DEVELOPMENT PROGRAMS ARE AVAILABLE TO PROMOTE A HIGH LEVEL OF ECONOMIC OPPORTUNITY IN THE REGION. TWENTY-FOUR LOANS WERE FUNDED UNDER THE BUSINESS DEVELOPMENT PROGRAMS IN FY 2012 AND INCLUDED THE FOLLOWING: SMALL BUSINESS LOANS ARE AVAILABLE FOR ENTREPRENEURS WHO HAVE EXPERIENCE, EXPERTISE AND A WELL-DEVELOPED BUSINESS PLAN. SEVENTEEN LOANS TOTALING \$218,392 WERE FUNDED UNDER THIS PROGRAM. THE REVOLVING LOAN FUND PROGRAM PROVIDES GAP FINANCING FOR BUSINESS START-UPS AND EXPANSIONS WHICH CREATE NEW JOBS AND LEVERAGE ADDITIONAL MONIES. SEVEN LOANS TOTALING \$762,624 WERE FUNDED UNDER THIS PROGRAM. THE COMMUNITY LOAN FUND PROGRAM REINVESTS RESOURCES IN COMMUNITIES THAT HAVE RAISED A POOL OF LOAN FUND DOLLARS TO PROMOTE ECONOMIC GROWTH WITHIN THEIR COMMUNITY. NO LOANS WERE APPROVED UNDER THIS PROGRAM.</p> <p>D) ADMINISTRATIVE EXPENSES THE FOUNDATION INCURRED \$1,643,462 IN ADMINISTRATIVE COSTS FOR DELIVERY OF PROGRAM SERVICES. THESE COSTS INCLUDED SALARIES, FRINGE BENEFITS, SUPPLIES, TELEPHONE, POSTAGE, TRAVEL, OVERHEAD, PRINTING, LOAN LOSSES, LOAN INTEREST, PURCHASED SERVICES, EDUCATION AND PROMOTION.</p>					

[illegible][illegible]

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e	Total program service expenses	\$ 3,431,967
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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.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	Yes	
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.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		
20b			

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V		Statements Regarding Other IRS Filings and Tax Compliance	
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	62	
1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	21	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	No
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	No
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	12		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	12
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> MN
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> TIMOTHY WANG 4225 TECHNOLOGY DR NW BEMIDJI, MN 56601 (218) 759-2057

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JON LINNELL DIRECTOR	3 00	X						0	0	0
(2) TOM ANDERSON DIRECTOR	3 00	X						0	0	0
(3) PETE HADDELAND DIRECTOR	3 00	X						0	0	0
(4) JON QUISTGAARD DIRECTOR	3 00	X						0	0	0
(5) FAYE AUCHENPAUGH DIRECTOR	3 00	X						0	0	50
(6) LEAH PIGATTI DIRECTOR	3 00	X						0	0	0
(7) ERIC BERGESON DIRECTOR	3 00	X						0	0	50
(8) JODY HORNTVEDT DIRECTOR	3 00	X						0	0	0
(9) GARY PURATH CHAIR	3 00			X				0	0	100
(10) ROBERT HAGER VICE CHAIR	3 00			X				0	0	0
(11) LAURIE WILSON SECRETARY	3 00			X				0	0	0
(12) JUDY ROY TREASURER	3 00			X				0	0	50
(13) NANCY VYSKOCIL PRESIDENT	40 00			X	X	X		119,920	0	16,470

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	119,920	0	16,720

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
COMPASS CAPITAL MANAGEMENT INC SUITE 400 BAKER BUILDING 706 SECO MINNEAPOLIS, MN 55402	INVESTMENT MANAGEMENT	107,189

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

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	186,104				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,053,381				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f			3,239,485			
Program Service Revenue			Business Code					
	2a	INTEREST REVENUE-LOANS	900099	227,082	227,082			
	b	PARTICIPATION FEES	900099	184,947	184,947			
	c	LOAN APPLICATION FEES	900099	10,770	10,770			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			422,799			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,233,211			1,233,211	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		9,913,944						
		8,982,837						
		931,107						
	d	Net gain or (loss)		931,107			931,107	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a				
	b	Less direct expenses		b				
	c	Net income or (loss) from fundraising events . . .						
	9a	Gross income from gaming activities See Part IV, line 19		a				
	b	Less direct expenses		b				
	c	Net income or (loss) from gaming activities . . .						
	10a	Gross sales of inventory, less returns and allowances		a				
	b	Less cost of goods sold		b				
c	Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			5,826,602	422,799	0	2,164,318	

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,583,855	1,583,855		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	204,650	204,650		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,132,337	661,478	395,654	75,205
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	348,977	203,054	127,355	18,568
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	30,577	29,701		876
c	Accounting	18,795	8,825	9,970	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	185,360	173,899	11,461	
g	Other	455,074	438,380	10,327	6,367
12	Advertising and promotion	29,219	3,051	20,878	5,290
13	Office expenses	125,279	60,571	49,872	14,836
14	Information technology				
15	Royalties				
16	Occupancy	11,960	6,339	5,621	
17	Travel	88,318	49,751	25,319	13,248
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	7,767	7,745	22	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	54,147	28,890	25,257	
23	Insurance	9,375	3,047	6,328	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MISCELLANEOUS	87,615	35,367	47,795	4,453
b	MAINTENANCE AND REPAIR	27,229	14,690	12,252	287
c	EDUCATION	25,435	17,184	3,235	5,016
d	SUBSCRIPTIONS	15,210	7,865	2,571	4,774
e					
f	All other expenses	-104,412	-106,375	1,963	
25	Total functional expenses. Add lines 1 through 24f	4,336,767	3,431,967	755,880	148,920
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			100	1	150
	2	Savings and temporary cash investments			403,906	2	764,188
	3	Pledges and grants receivable, net			542,437	3	323,498
	4	Accounts receivable, net			3,473	4	3,458
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			3,960,872	7	3,590,455
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			4,482	9	6,374
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,762,524			
	b	Less: accumulated depreciation	10b	525,476	641,368	10c	1,237,048
	11	Investments—publicly traded securities			40,637,934	11	40,946,317
	12	Investments—other securities. See Part IV, line 11			672,023	12	1,171,225
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			188,960	15	169,511
16	Total assets. Add lines 1 through 15 (must equal line 34)			47,055,555	16	48,212,224	
Liabilities	17	Accounts payable and accrued expenses			222,526	17	282,271
	18	Grants payable			352,321	18	273,723
	19	Deferred revenue			292,057	19	29,387
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			978,533	23	1,051,923
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			2,313,847	25	2,728,624
	26	Total liabilities. Add lines 17 through 25			4,159,284	26	4,365,928
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			472,980	27	385,115
28		Temporarily restricted net assets			15,288,253	28	15,079,947
29		Permanently restricted net assets			27,135,038	29	28,381,234
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds				30	
31		Paid-in or capital surplus, or land, building or equipment fund				31	
32		Retained earnings, endowment, accumulated income, or other funds				32	
33		Total net assets or fund balances			42,896,271	33	43,846,296
34	Total liabilities and net assets/fund balances			47,055,555	34	48,212,224	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,826,602
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,336,767
3	Revenue less expenses Subtract line 2 from line 1	3	1,489,835
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42,896,271
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-539,810
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	43,846,296

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization NORTHWEST MINNESOTA FOUNDATION	Employer identification number 41-1556013
--	--

Part I Reason for Public Charity Status

(All organizations must complete this part.) See instructions

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

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

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,134,730	3,260,795	3,551,877	3,696,459	3,239,485	16,883,346
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,134,730	3,260,795	3,551,877	3,696,459	3,239,485	16,883,346
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)						3,579,458
6 Public Support. Subtract line 5 from line 4						13,303,888

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	3,134,730	3,260,795	3,551,877	3,696,459	3,239,485	16,883,346
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,344,358	1,378,875	1,386,181	1,419,047	2,164,318	7,692,779
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						24,576,125

12 Gross receipts from related activities, etc (See instructions)

122,283,249

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	54 130 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	56 330 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

NORTHWEST MINNESOTA FOUNDATION

Employer identification number

41-1556013

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	24
2	Aggregate contributions to (during year)	28,052
3	Aggregate grants from (during year)	41,950
4	Aggregate value at end of year	3,554,575
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

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

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

1b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

If "Yes," explain the arrangement in Part XIV

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	33,218,360	27,802,534	26,132,066	31,761,703	
1b Contributions	1,104,892	1,530,559	1,378,023	252,147	
1c Investment earnings or losses	1,383,996	5,704,204	2,168,912	-4,257,358	
1d Grants or scholarships					
1e Other expenditures for facilities and programs	1,544,795	1,507,476	1,427,607	1,601,766	
1f Administrative expenses	99,767	311,461	448,860	97,912	
1g End of year balance	34,062,686	33,218,360	27,802,534	26,056,814	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 81 690 %

c

Term endowment ▶ 18 310 %

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		286,528		286,528
1b Buildings		1,043,057	196,747	846,310
1c Leasehold improvements				
1d Equipment		432,939	328,729	104,210
1e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				1,237,048

Schedule D (Form 990) 2011

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	15,826,602
2	Total expenses (Form 990, Part IX, column (A), line 25)	4,336,767
3	Excess or (deficit) for the year Subtract line 2 from line 1	1,489,835
4	Net unrealized gains (losses) on investments	-539,810
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 - 8	-539,810
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	950,025

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	15,286,792
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-539,810	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e-539,810	35,826,602
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)55,826,602	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	14,336,767
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e0	34,336,767
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c0	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)54,336,767	

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ENDOWMENT FUNDS ARE HELD AND ADMINISTERED FOR THE PURPOSE OF CONTINUING THE ADMINISTRATION AND PROGRAM ACTIVITIES OF THE NORTHWEST MINNESOTA FOUNDATION

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
NORTHWEST MINNESOTA FOUNDATION

Employer identification number
41-1556013

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes

☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

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

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

43

3

Enter total number of other organizations listed in the line 1 table ▶

5

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) BUSINESS TECHNICAL ASSISTANCE	23	26,170			
(2) SCHOLARSHIP	151	92,250			
(3) IDEA AWARD WINNERS	2	20,000			

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AFTER A GENERAL GRANT IS AWARDED, AN AWARD LETTER IS SENT WHICH IS SIGNED BY THE GRANTEE THIS LETTER IS SUBJECT TO THE GRANTEE ACCEPTING TERMS IN THE AWARD LETTER INCLUDING WHEN PAYMENTS WILL BE SENT AND WHEN REPORTS WILL BE DUE NORMALLY THE FIRST PAYMENT IS SENT AFTER THE GRANTEE SIGNS THIS AGREEMENT FOLLOWING PAYMENTS ARE SENT AFTER SENDING IN SATISFACTORY REPORTS WITH COMPONENT FUNDS, PAYMENT IS SENT AFTER REQUIRED MATERIALS ARE RECEIVED FROM THE ADVISORY COMMITTEE SCHOLARSHIP PAYMENTS ARE SENT DIRECTLY TO THE POST-SECONDARY SCHOOLS AFTER REQUIRED INFORMATION IS RECEIVED FROM THE STUDENTS

Software ID:
Software Version:
EIN: 41-1556013
Name: NORTHWEST MINNESOTA FOUNDATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGASSIZ AUDUBON SOCIETY27453 190TH ST N WARREN, MN 56762	41- 1434405		18,000				FOR NORTHWESTERN MINNESOTA COMMUNITY BIRDWATCH
AURIPO BOX 599 CROOKSTON, MN 56716	41- 1635043		9,078				FOR INCREASING BIOMASS YIELD AND ECONOMIC EFFICIENCY OF HERBACEOUS ENERGY CROPS IN NW MINNESOTA

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAGLEY INDEPENDENT SCHOOL DIST #162 202 BAGLEY AVE N BAGLEY, MN 56621	41-6000640		18,469				FOR NORTH PLAYGROUND-BAGLEY ELEMENTARY SCHOOL
BEMIDJI AREA RACE RELATIONS PO BOX 2097 BEMIDJI, MN 56619	41-1735007		8,333				FOR BARRC/SHARED VISION ALLIANCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEMIDJI AREA SCHOOLS DIST #313300 GILLETTE DR N BEMIDJI, MN 56601	41-6000181		20,972				FOR SCHOOL ACTIVITIES EQUIPMENT AND SERVICES
CITY OF BEMIDJI 317 4TH ST NW BEMIDJI, MN 56601	41-6004972		10,000				FOR BEMIDJI AREA PARKS, TRAILS, AND OPEN SPACES PLAN UPDATE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF BEMIDJIPO BOX 191 BEMIDJI, MN 56619	81-0599601		12,500				FOR VOLUNTEER PARTNERSHIP PROJECT
CLEAR WATERS LIFE CENTERPO BOX 155 CLEARBROOK, MN 56634	77-0643868		13,498				FOR CWLC GONVICK COMMUNITY ENGAGEMENT PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEARWATER AMBULANCE SERVICE203 4TH ST NW BAGLEY,MN 56621	41- 1266009		11,961				FOR ALS EQUIPMENT- VENTILATOR
COMMUNITY RESOURCE CONNECTIONS3124 HANNAH AVE BEMIDJI,MN 56601	41- 1782146		24,000				FOR BEYOND THE SENIOR ANNUAL CHECK UP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COURAGE CENTER DULUTH 424 SUPERIOR ST DULUTH, MN 55802	41-0706118		9,000				FOR BEMIDJI ADAPTIVE SKI PROGRAM
EASTERN HUBBARD COUNTY FIRE DISTRICT 31557 170TH ST AKELEY, MN 56433	41-1608697		7,000				FOR AKELEY CORNER PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF FERTILE PO BOX 628 FERTILE, MN 56540	41- 6005154		7,998				FOR KIOSK
FERTILE- BELTRAMI PUBLIC SCHOOL DIST #599PO BOX 648 FERTILE, MN 56540	41- 6008457		28,929				FOR MARQUEE SIGN

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAY FISHER33163 593RD AVE WARROAD,MN 56763	45- 4498501		10,000				FOR IDEA AWARD WINNER
FOSSTON COMMUNITY LIBRARY & ARTS ASSOC217 THIRD STREET N FOSSTON,MN 56542	41- 1382174		40,953				FOR LIBRARY AND ARTS CENTER BUILDING PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENBUSH MEDICAL PARK 19120 200TH ST GREENBUSH, MN 56726	41-1804205		10,240				FOR ACOUSTIC CEILING AND WALL TILES
HEADWATERS REGIONAL DEVELOPMENT COMMISSIONPO BOX 906 BEMIDJI, MN 56619	41-0983661		11,250				FOR ACTIVE HUBBARD COUNTY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUBBARD COUNTY EDC301 COURT AVE PARK RAPIDS, MN 56470	20- 4208381		10,000				FOR OPERATING EXPENSES
LAKE OF THE WOODS AREA INDUSTRIAL DEVELOPMENT CORPPO BOX 181 BAUDETTE, MN 56623	41- 0988228		47,000				FOR BAUDETTE LINEMAN'S SCHOOL

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE OF THE WOODS SCHOOL DIST #390PO BOX 310 BAUDETTE, MN 56623	41-0956348		10,000				FOR PARK REMODEL
LAKE OF THE WOODS SOIL AND WATER CONSERVATION DISTPO BOX 217 BAUDETTE, MN 56623	41-1280033		7,500				FOR BOSTIC AND ZIPPEL COMPREHENSIVE WATERSHED ASSESSMENT PROJECT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARK LANDES 2122 ANNE ST NW BEMIDJI, MN 56601	27- 3177871		10,000				FOR IDEA AWARD WINNER
LIFECARE MEDICAL CENTER715 DELMORE DR ROSEAU, MN 56751	41- 1804205		30,865				FOR FURNISHINGS- GREENBUSH MEDICAL PARK

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
M STATE900 HIGHWAY 34 EAST DETROIT LAKES, MN 56501	41- 1687554		8,634				FOR MISCELLANEOUS EXPENSES
CITY OF MAHNOMENPO BOX 250 MAHNOMEN, MN 56557	41- 6005340		5,625				FOR CITY OF MAHNOMEN CODIFICATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NATURE CONSERVENCY MINNESOTA CHAPTER1101 W RIVER PKWY MINNEAPOLIS, MN 55415	53-0242654		8,333				FOR NORTHWEST MINNESOTA RENEWABLE ENERGY PROJECT
THE NATURE CONSERVENCY532 SUMMIT AVENUE CROOKSTON, MN 56716	53-0242652		8,333				FOR BIOMASS AND WASTE TO ENERGY BUSINESS DEVELOPMENT SURVEY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORMAN COUNTY EAST SCHOOL DIST #2215PO BOX 420 TWIN VALLEY, MN 56584	41-1816469		10,820				FOR EAGLE'S NEST PRESCHOOL ADDITIONAL DAY
NORTHWEST REGIONAL DEVELOPMENT COMMISSION115 S MAIN STE 1 WARREN, MN 56762	41-1231594		6,250				FOR BEMIDJI PALLIATIVE CARE INITIATIVE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST RESEARCH AND OUTREACH CENTER UNIVERSITY OF MN C CROOKSTON, MN 56716	41-6007513		10,934				FOR ASSESSMENT OF CATTAIL COVER IN NORTHWEST MINNESOTA AND POTENTIAL FOR BIOENERGY HARVEST AND WETLAND MANAGEMENT
PARK RAPIDS SCHOOL DIST #309301 N HUNTSINGER AVE PARK RAPIDS, MN 56470	41-6001518		12,500				FOR PARK RAPIDS COMMUNITY STUDENT SUCCESS INITIATIVE

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CITY OF PARK RAPIDS212 2ND ST W PARK RAPIDS, MN 56470	41-6005449		6,500				FOR AUGUST 18TH CELEBRATION-2011 PASSPORT WINNER
PREVENT CHILD ABUSE MINNESOTA709 UNIVERSITY AVE SAINT PAUL, MN 55104	41-1354842		12,500				FOR RED LAKE TEEN PARENT SUPPORT

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RED LAKE BAND OF CHIPPEWA INDIANSPO BOX 550 RED LAKE, MN 56671	41-0692381		20,000				FOR 2011 INDIGENOUS GAMES
RED LAKE COUNTY SOIL & WATER2602 WHEAT DR RED LAKE FALLS, MN 56750	41-0859809		6,250				FOR RED LAKE COUNTY SWCD CULVERT INVENTORY PROJECT

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CITY OF ROSEAU PO BOX 307 ROSEAU, MN 56751	41- 6005499		9,639				FOR GAZEBO PARK PROJECT
SANFORD HEALTH FOUNDATION OF NORTHERN MINNESOTA1300 ANNE ST NW BEMIDJI, MN 56601	41- 1389317		6,000				FOR DIGITAL MAMMOGRAPHY

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

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CITY OF STEPHENPO BOX 630 STEPHEN, MN 56757	41-6005860		6,500				FOR GOLF CART BRIDGE IMPROVEMENT
JEFF SULLIVAN 1552 CARR LAKE ROAD SE BEMIDJI, MN 56601	41-2022738		10,000				FOR IDEA AWARD WINNER

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THIEF RIVER FALLS PUBLIC SCHOOLS 101 KNIGHT AVE S THIEF RIVER FALLS, MN 56701	41-6003126		22,540				FOR TRF CAREER AND COLLEGE READINESS INITIATIVE
TRI-VALLEY OPPORTUNITY COUNCIL INCPO BOX 607 CROOKSTON, MN 56716	41-0888488		12,500				FOR FAMILY VOICE & CHOICE NETWORK

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

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UNIVERSITY OF MINNESOTA EXTENSION SERVICE262 OWEN HALL CROOKSTON, MN 56716	41-6007513		6,250				FOR ORGANIC FRUIT PRODUCTION IN HIGH TUNNELS IN ZONES 2 AND 3
WARREN SENIOR CENTER129 W JOHNSON AVE WARREN, MN 56762	41-0872993		8,500				FOR COOK STOVE

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WARROAD ELEMENTARY SCHOOL510 CEDAR AVE N WARROAD, MN 56763	41-6003720		10,000				FOR STUDENT SPONSORSHIP
WARROAD SENIOR LIVING CENTER 1401 LAKE ST NW WARROAD, MN 56763	41-1351830		7,500				FOR MISSION BENEVOLENCE FUND

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011**Open to Public
Inspection**Name of the organization
NORTHWEST MINNESOTA FOUNDATION**Employer identification number**

41-1556013

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE 990 WILL BE PRESENTED TO THE BOARD FOR REVIEW AND APPROVAL BEFORE IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS MUST YEARLY SIGN THE CONFLICT OF INTEREST POLICY, WHICH IS WRITTEN TO EMPHASIZE FAIRNESS, CONSISTENCY AND INTEGRITY IN ALL OF ITS DECISION-MAKING, TO ENSURE THERE WILL BE NO BASIS FOR LEGAL ACTION OR ACCUSATIONS OF SELF-DEALING THE BOARD WILL EXCLUDE ANY MEMBER FROM ALL DELIBERATIONS AND DECISIONS CONCERNING ACTIONS ON ANY PROJECT, SERVICE OR OTHER MATTER PROPOSED FOR FUNDING IN WHICH SUCH MEMBER MAY HAVE A DIRECT OR INDIRECT FIDUCIARY INTEREST ANY MEMBER OF THE BOARD MAY QUESTION ANOTHER BOARD MEMBER AS TO CONFLICT OF INTEREST, AND THE BOARD OF DIRECTORS AS A WHOLE WILL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS
	FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT IS SUBJECT TO ANNUAL REVIEW BY THE BOARD WHO SUBSEQUENTLY DETERMINES THE SALARY OTHER KEY EMPLOYEES ARE REVIEWED BY SUPERVISORS AND THE PRESIDENT DETERMINES SALARY BASED ON EXTERNAL DATA
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S 990 AND ANNUAL REPORT (INCLUDING FINANCIAL STATEMENTS) ARE AVAILABLE UPON REQUEST THE 990 IS ALSO AVAILABLE ON THE GUIDESTAR WEBSITE THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE PUBLIC
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -539,810

Additional Data

Software ID:
Software Version:
EIN: 41-1556013
Name: NORTHWEST MINNESOTA FOUNDATION

Form 990, Special Condition Description:

Special Condition Description
