## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

**Open to Public** Inspection

A	For the	2022 calend	dar year, or tax year beginning	ng 04/01/2022	and ending	03	<u>3/31/2</u> 02	3		
В	Check if	applicable:	C Name of organization KEWEF	ENAW COMMUNITY FOUNDA	ATION		D	Employer i	dentification	number
	Address	change	Doing business as					38-3223079		
	Name ch	nange	Number and street (or P.O. box	if mail is not delivered to street ad	ldress)	E Telephone number				
	Initial ret	urn	PO Box 265					906	5-482-9673	
	Final retu	ırn/terminated	City or town, state or province,	country, and ZIP or foreign postal	code					
	Amende	d return	Hancock, MI 49930				G	Gross recei	pts\$	117,798
	Applicati	ion pending	F Name and address of principal of	officer: Andy Costic		H(a) Is th	nis a group r	eturn for subo	rdinates? 🔲 🗙	es 🔽 No
			PO Box 265, Hancock, MI 49	9930		H(b) Are	e all subo	rdinates inc	luded? 🗌 Ye	es 🗌 No
ī	Tax-exe	mpt status:	✓ 501(c)(3)	) (insert no.) 🔲 4947(a	a)(1) or 🗌 52	7 If "No,"	attach a	list. See ins	tructions.	
J	Website	: www.kev	weenawcommunityfoundation	n.org		H(c) Gro	oup exem	ption numb	er	
K	Form of o	organization: 🗸	Corporation Trust Assoc	ciation Other	L Year of for	rmation: 199	94 M	State of leg	al domicile:	MI
Р	art I	Summa	ry							
	1	Briefly des	scribe the organization's mis	ssion or most significant ac	tivities: The	mission of th	e Kewe	enaw Cor	nmunity	
e		Foundation	n is to promote philanthropy,	, develop and manage perma	nent endown	nents from a l	broad ra	nge of do	onors, and a	award
Activities & Governance		charitable	grants that enhance the qual	ity of life in the Keweenaw Pe	eninsula.					
/err	2	Check this	box if the organization	discontinued its operations	or disposed	d of more tha	an 25%	of its ne	t assets.	
õ	3		f voting members of the gov				1	3		12
<b>∞</b>	4		f independent voting memb		•		_	4		12
ies	5		ber of individuals employed				. [	5		0
Ĭ	6		ber of volunteers (estimate i	•			. [	6		11
Act	7a		lated business revenue fron	= :			.	7a		0
	b		ted business taxable incom	-	7b		0			
				, , ,		Prio	r Year		Current Ye	
Revenue	8	Contributio	ons and grants (Part VIII. lin	and grants (Part VIII, line 1h)						
	9		ervice revenue (Part VIII, lin	•				,077 0		9,060
Ş.	10	_	t income (Part VIII, column				213	-		53,752
æ	11		enue (Part VIII, column (A), li				210	0		0
	12		nue—add lines 8 through 11		-		215			62,812
_	13	_	d similar amounts paid (Part					719		2,100
	14		aid to or for members (Part				20	0		0
"	14-	-	ther compensation, employed				25	,930		0
Expenses	16a		nal fundraising fees (Part IX,	-			23	0		0
Sen	b		raising expenses (Part IX, co		0			-		
Ä	17		enses (Part IX, column (A), li			-	70	207		14,044
	18	-	enses. Add lines 13–17 (mus	-	line 25)			,287 ,936		
	19	-	ess expenses. Subtract line							16,144
_ g		Tieveriue ie	333 expenses. Subtract line	TO HOTTIME 12		Beginning of		,856 Vear	End of Yea	46,668
Net Assets or Fund Balances	20	Total accet	ts (Part X, line 16)			Deginning of		,072		
Asse	21		ities (Part X, line 26)							836,542
d t	22		or fund balances. Subtract	t line 21 from line 20				,006		353,230
	art II		re Block	tillie 21 Holli lille 20			347	,066		483,312
Ur	nder pena	Ities of perjury	v, I declare that I have examined thi					est of my kn	owledge and	belief, it is
tru	ie, correct	t, and complet	te. Declaration of preparer (other the	an officer) is based on all information	on of which prep	parer has any kn	owledge.			
Sig	an	Signature of	officer				Date			
	ere	"								
110	51 6		tic, Treasurer/Vice Chair name and title							
		1 71 1	e preparer's name	Preparer's signature		Date		. $ abla$	PTIN	
Pa	aid	гии туре	preparer smarme	i reparer s signature		Date		neck if lf-employed		
	epare					1			1	
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<u> </u>		Firm's add		r abour abour Oca in the	ations		Phone no	).		
IVIA	и шен	าง นเรตนรร 1	this return with the prepare	r shown above? See instruc	HOUS				I I YAS	No

1 Briefly describe the organization's mission:  The mission of the Keweenew Community Foundation is to promote philanthropy, develop and manage permanent endowments from a broad range of donors, and award charitable grants that enhance the quality of life in the Keweenew Peninsula.  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.  Oil of the organization cases conducting, or make significant changes in how it conducts, any program services?  If Yes, "Gescribe these changes on Schedule O.  Did the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(clt) and 501(clt) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  4a (Code: ) (Expenses \$ 2,100 including grants of \$ 2,100 ) (Revenue \$ 0 )  Briefly: Grants Approved: Other \$2,100.  4b (Code: ) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)  NA  4d (Code: ) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)  Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)  Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)  Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	Part		Accomplishments response or note to any line in this	Part III	
### from a broad range of donors, and award charitable grants that enhance the quality of life in the Kewsenaw Peninsula.    Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27   Yes No If Yes	1				
### from a broad range of donors, and award charitable grants that enhance the quality of life in the Kewsenaw Peninsula.    Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27   Yes No If Yes		•		y, develop and manage permanent	endowments
prior Form 990 or 990-EZ?					
prior Form 990 or 990-EZ?					
prior Form 990 or 990-EZ?					
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O.  Bescribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(e)(3) and 501(e)(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.  Code: ) (Expenses \$ 2,100 including grants of \$ 2,100 ) (Revenue \$ 0.)  Briefly; Grants Approved: Other \$2,100.  Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  Code: ) (Expenses \$ 0.0 including grants of \$ 0.) (Revenue \$ 0.)  Code: ) (Expenses \$ 0.0 including grants of \$ 0.) (Revenue \$ 0.)	2				
services?		If "Yes," describe these new services or	n Schedule O.		
4a (Code:) (Expenses \$	3				
4a (Code:) (Expenses \$		If "Yes," describe these changes on Scl	nedule O.		
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  4a (Code: ) (Expenses \$ 2,100 including grants of \$ 2,100 ) (Revenue \$ 0.)  Briefly: Grants Approved: Other \$2,100.  4b (Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  NA  4c (Code: ) (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)  MA  4d Other program services (Describe on Schedule O.)  (Expenses \$ 0 including grants of \$ 0.) (Revenue \$ 0.)	4	•		ts three largest program services	, as measured by
4a (Code:) (Expenses \$					
### Part of the Program services (Describe on Schedule O.)    Code:				S	
### Part of the Program services (Describe on Schedule O.)    Code:					
### Part of the Program services (Describe on Schedule O.)    Code:	4a	(Code: ) (Expenses \$	2 100 including grants of \$	2 100 ) (Revenue \$	0)
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4b (Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )  N/A  4c (Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )  NA  4d Other program services (Describe on Schedule O.)  (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )					
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(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )	4d	Other program services (Describe on So	chedule O.)		
	-			e \$ 0 )	
	4e	Total program service expenses	2,100	• ,	

Part I	Checklist of Required Schedules
1 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If

			res	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	~	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3	<b>V</b>	V
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		~
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			
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	5 6		<i>V</i>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9	_	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		_
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, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		~
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		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e		ν ν
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	_	
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 and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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, Parts I and IV	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	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		~

Part l	V Checklist of Required Schedules (continued)		-	
			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		_
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		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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), 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		_
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		_
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? <i>If "Yes," complete Schedule L, Part II</i>	26		~
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		~
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		_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	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		_
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
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		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> 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		_
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		_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	,	
Part	Statements Regarding Other IRS Filings and Tax Compliance		. •	
	Check it Schedule O contains a response or note to any line in this Part V	• •	Yes	No
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		. 55	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_
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).			
а	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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		_
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
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		1
8	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	Did the sponsoring organization make any taxable distributions under section 4966?	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
10-		10-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
b 13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	100		
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	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 income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2022)

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. 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 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. Enter the number of voting members included on 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 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b 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 on Schedule O . . . . . 9 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 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 **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 ~ Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official . . . . . . 15a Other officers or key employees of the organization . . . . . . . . . . . . 15b 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 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MI 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request Other (explain on Schedule O) Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Andy Costic, (906)482-9673

Part VI

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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.
- 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.

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

				(0	C)					
(A)	(B)	Position		(D)	(E)	(F)				
Name and title	Average		(do not check more than one				Reportable	Reportable	Estimated amount	
	hours		box, unless person is both an officer and a director/trustee)		compensation	compensation	of other			
	per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
John Lehman	1.25									
Board Chair	0.00	~		~				0	0	0
Andy Costic	0.50									
Board Vice-Chair	0.00	~		~				0	0	0
Charles Ouellette	1.25									
Treasurer	0.00	~		~				0	0	0
Sharon Fisher	0.50									
Secretary	0.00	~		~				0	0	0
George Twardzik	0.50									
Trustee	0.00	~						0	0	0
Matt Krause	0.50									
Trustee	0.00	~						0	0	0
Iola Brubaker	0.50									
Trustee	0.00	~						0	0	0
Kim Salmi	0.50									
Trustee	0.00	~						0	0	0
Angela Piche	0.50									
Trustee	0.00	~						0	0	0
Cassy Tefft de Munoz	0.50									
Trustee	0.00	~						0	0	0
Kelly Kamm	0.50									
Trustee	0.00	~						0	0	0
Scott Dianda	0.50									
Trustee	0.00	~						0	0	0
Robin Meneguzzo	5.00									
Executive Director	0.00			~				0	0	0

Part	VII Section A. Officers, Directors,	rustees, I	Key I	⊨mį			s, ar	a F	ilgnest Compe	nsated Emplo	oyees (continued)
	(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	rson	e than	n an	(D)  Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individua or directo	a Institutional trustee	a Officer	Key employee	or/tru Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2 1099-MISC/ 1099-NEC)	compensation
1h	Subtotal								0		0
C	Total from continuation sheets to Part	VII, Sectio	n A								
d 2	Total number of individuals (including reportable compensation from the organi		limite	ed t	to t	hos	e lis	ted	above) who re	eceived more	
3	Did the organization list any former of		ector	tru	ıste	- k	ev e	mpl		st compensate	Yes No
4	employee on line 1a? If "Yes," complete so For any individual listed on line 1a, is the	Schedule J	for su	uch	indi	ivid	ual				3 🗸
-	organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization								. •	tion or individua	
Secti	on B. Independent Contractors										
1	Complete this table for your five high compensation from the organization. Report										
	(A) Name and business add	ress							(B) Description of serv	vices .	(C) Compensation
None											
	Total number of independent agreement	ro (includia	20 b	.+	ot '	im:	od t		and listed share	a) who	
2	Total number of independent contractor received more than \$100,000 of compens						.eu ((	וו כ	nose listed abov	e) WIIO	

	•
Part VIII	Statement of Revenue

		Check if Schedule O cont	tains a respon	se or note to an	y line in this Pa	rt VIII		🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns	1а	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b	0				
Ω, G	С	Fundraising events	1c	0				
fts Ir A	d	Related organizations	1d	0				
, Gi	е	Government grants (contrib		0				
Sin	f	All other contributions, gifts						
utic		and similar amounts not include		9,060				
rib O#	g	Noncash contributions incl						
ont		lines 1a–1f	- 9	\$ 0				
a Č	h	Total. Add lines 1a-1f			9,060			
•				Business Code				
Program Service Revenue	2a							
en ue	b							
n S 'en	C							
gram Ser Revenue	d							
rog	e	All all						
<u> </u>	f	All other program service re						
	g 3	<b>Total.</b> Add lines 2a–2f Investment income (include			0			
					13,664	13,664	0	0
	4	Income from investment of		13,004	13,004	0	0	
	5	Royalties		na process	0	0	0	0
			(i) Real	(ii) Personal			9	,
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	C	Rental income or (loss) 6c	0	0				
	d	Net rental income or (loss)		_				
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets		_				
		other than inventory 7a	95,074	0				
e	b	Less: cost or other basis						
Revenue		and sales expenses . 7b	54,986	0				
lev	С	Gain or (loss) <b>7c</b>	40,088	0				
	d	Net gain or (loss)	<u></u>		40,088	40,088	0	0
Other	8a	Gross income from fund	draising					
0		events (not including \$	0					
		of contributions reported						
	_	1c). See Part IV, line 18 .						
	b	Less: direct expenses						
	C	Net income or (loss) from for		nts				
	9a	Gross income from activities. See Part IV, line						
	<b>L</b>							
		Less: direct expenses Net income or (loss) from g						
		Gross sales of inventor		;5				
	IVa		· · · 10a					
	h	Less: cost of goods sold .	100					
	C	Net income or (loss) from s		pry				
s				Business Code				
on e	11a							
scellaneo Revenue	b							
elli	С							
Miscellaneous Revenue	d	All other revenue						
≥	е	Total. Add lines 11a-11d .	<u>.</u>		0			
	12	Total revenue. See instruc	ctions		62.812	53.752	0	0

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Check if Schedule O contains a response or note to any line in this Part IX	

	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations		одренеее	денега: одренево	одренева
	and domestic governments. See Part IV, line 21 .	2,100	2,100		
2	Grants and other assistance to domestic	2,100	2,100		
_	individuals. See Part IV, line 22	0	0		
3	, and the second	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
		0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	0	0	0	0
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include	0	0	0	0
-	section 401(k) and 403(b) employer contributions)				
Ω	, , , , , , , , , , , , , , , , , , , ,				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	2,686		2,686	
d	Lobbying				
е	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 Schedule O.) .	166		166	
12	Advertising and promotion	240		240	
13	Office expenses	2,654		2,654	
14	Information technology	1,499		1,499	
15	Royalties	1,477		1,477	
16	Occupancy	2,785		2,785	
17 18	Travel	298		298	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	1,938		1,938	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	758		758	
23	Insurance	1,000		1,000	
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 O.)				
а					
b					
c					
d					
e	All other expenses	20		20	
25	Total functional expenses. Add lines 1 through 24e	16,144	2,100	14,044	0
26	Joint costs. Complete this line only if the	10,144	2,100	14,044	U
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this P	art X		🔲
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	180,701	2	176,802
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	
	5	Loans and other receivables from 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	0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
Ś	7	Notes and loans receivable, net	0	7	
Assets	8	Inventories for sale or use	0	8	
As	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	746,371	11	659,740
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11	0	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	927,072	16	836,542
	17	Accounts payable and accrued expenses	0	17	
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	380,006	21	353,230
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons	0	_	
_	23	Secured mortgages and notes payable to unrelated third parties	0	_	
	24	Unsecured notes and loans payable to unrelated third parties	0	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		25	
	26	Total liabilities. Add lines 17 through 25	380,006	26	353,230
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here value and complete lines 27, 28, 32, and 33.			
<u>ala</u>	27	Net assets without donor restrictions	547,066	27	483,312
B	28	Net assets with donor restrictions	0	28	0
Func		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSI	31	Retained earnings, endowment, accumulated income, or other funds .		31	
¥ A	32	Total net assets or fund balances	547,066	32	483,312
ž	33	Total liabilities and net assets/fund balances	927,072	_	836,542

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			~
1	Total revenue (must equal Part VIII, column (A), line 12)		6	2,812
2	Total expenses (must equal Part IX, column (A), line 25)		1	6,144
3	Revenue less expenses. Subtract line 2 from line 1		4	6,668
4				
5	Net unrealized gains (losses) on investments		-8	8,642
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)		-2	1,780
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		48	3,312
Part	Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
	A		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain of	<u></u>		
	Schedule O.	"		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	~	
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled of			
	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	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on			
	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 committee that as the committee that are committeed that a supplication of the committee that are committeed that are committeed to the committee that are comm	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 of	on		
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	ne		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	ne		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .	3b		

Form **990** (2022)

### **SCHEDULE A** (Form 990)

**Public Charity Status and Public Support** 

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization	Name of the organization Employer identification number					
KEWEENAW COMMUNITY FOUNDATION					38-32	
Part I Reason for Public Cha						ons.
The organization is not a private foundation		,		-	•	
1 A church, convention of church					U(b)(1)(A)(i).	
<ul><li>2  A school described in section</li><li>3  A hospital or a cooperative ho</li></ul>			-		\/A\/;;;\	
<ul><li>3  A hospital or a cooperative ho</li><li>4  A medical research organization</li></ul>						(iii) Enter the
hospital's name, city, and stat	·e:					
5 An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
<ul> <li>A federal, state, or local gover</li> <li>An organization that normally described in section 170(b)(1</li> </ul>	receives a subs	tantial part of its sup				n the general public
8 A community trust described	in <b>section 170(b</b> )	(1)(A)(vi). (Complete I	Part II.)			
9 An agricultural research organ or university or a non-land-gra university:	ant college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10 An organization that normally receipts from activities related support from gross investmen acquired by the organization a	after June 30, 197	related business taxal 75. See <b>section 509(</b> a	ole incom 1 <b>)(2)</b> . (Cor	ne (less se mplete Pa	art III.)	fees, and gross 33 <sup>1</sup> / <sub>3</sub> % of its businesses
11 An organization organized and	•	, ,	•		` '` '	
12 An organization organized and						
one or more publicly supporte the box on lines 12a through 1.						
a Type I. A supporting organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
b Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same			
c Type III functionally integ						ally integrated with,
d Type III non-functionally that is not functionally interequirement (see instructional see instructio	grated. The orga	nization generally mus	st satisfy	a distribu	ıtion requirement an	
e Check this box if the organ functionally integrated, or	nization received	a written determination	on from th	ne IRS tha	at it is a Type I, Type	e II, Type III
f Enter the number of supported						
<b>g</b> Provide the following information	n about the supp	orted organization(s).				
(i) Name of supported organization	(described on lines 1–10 listed in your governing support (see other support					(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 2,077 9,060 865,843 220,265 238,033 1,335,278 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 0 0 **Total.** Add lines 1 through 3 4 865,843 220,265 238,033 2,077 9,060 1,335,278 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) . . . . 190,424 **Public support.** Subtract line 5 from line 4 1,144,854 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total Amounts from line 4 . . . . . . 7 2,077 865,843 238,033 9,060 220,265 1,335,278 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 178,193 327,563 298,740 62,817 13,664 880,977 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 0 0 0 0 0 11 12 13 Sect 14 15 16a b 17a

	Total support. Add lines 7 through 10		2,21	6,255
2	Gross receipts from related activities, etc. (see instructions)	12	11	3,735
3	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax ye	ar as	a section 501(c)	(3)
	organization, check this box and <b>stop here</b>			. [
cti	on C. Computation of Public Support Percentage			
Ļ	Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	51.6	<b>66</b> %
5	Public support percentage from 2021 Schedule A, Part II, line 14	15	53.	.7 %
ìa	331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33	31/3%	or more, check th	າis
	box and <b>stop here</b> . The organization qualifies as a publicly supported organization			. [
b	331/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15	is 33¹	/3% or more, che	ck
	this box and <b>stop here</b> . The organization qualifies as a publicly supported organization			. 🗸
'a	10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 10% or more, and if the organization meets the facts-and-circumstances test, check this box a Part VI how the organization meets the facts-and-circumstances test. The organization qualifies organization	nd <b>st</b>	op here. Explain	in
b	10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 1 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this bo in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies organization	x and	stop here. Expla	ain
ł.	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b,	chec	k this hox and so	
	instructions			. [
			Schedule A (Form 99	0) 2022
			•	•

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Schedule A (Form 990) 2022 Page **3** 

### 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.)

Secti	on A. Public Support					,	
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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	<b>Total.</b> 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		1	I	1		
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(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						
С	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.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	-			-		
0 1:	organization, check this box and stop he						
	on C. Computation of Public Suppor			10 1 (f)		45	0/
15 16	Public support percentage for 2022 (line a Public support percentage from 2021 Scl		-				<u>%</u> %
16 Secti	on D. Computation of Investment In					16	70
17	Investment income percentage for 2022 (			ov line 13 colu	ımn (f\)	17	%
18	Investment income percentage for 2022 (			-			
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2022. If the organ						
·Ju	17 is not more than 331/3%, check this box						
b	331/3% support tests—2021. If the organiz		-	-		=	_
~	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	_	_	•	· · · · · · · · · · · · · · · · · · ·		

Schedule A (Form 990) 2022 Page 4

### **Supporting Organizations** Part IV

(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.)

### Se

Jeen	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	NO
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	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).	8		
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 <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
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.	10a		
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.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described 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 c 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 **Section B. Type I Supporting Organizations** Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations 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 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 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 supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. 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 instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2022

	Tune III New Functionally Integrated 500(a)(2) Supporting Ora		-ations	rage <b>C</b>
Part				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
Sect	instructions. All other Type III non-functionally integrated supporting organion A—Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		(Optional)
_ <u>.</u>	Recoveries of prior-year distributions	2		
_ <del>_</del> _	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
<u>.</u>	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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions)	ally i	ntegrated Type III suppor	rting organization

Schedule A (Form 990) 2022 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 . . . . . **e** From 2021 . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part I, Line 10 - Schedule A, Part II, Line 10 - Other Income (2017): Administrative Fees = \$8,393 Amounts received for administrative service primarily for serving as a Trustee for a Unitrust and also serving as a Fiduciary for grants received by other local non-profit organizations.

# SCHEDULE D (Form 990)

### **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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

KEWE	ENAW COMMUNITY FOUNDATION	38-3223079				
Par	<u> </u>		ls or Accounts.			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year) .					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor a	advisors in writing that the assets he	ld in donor advised			
	funds are the organization's property, subject to the	organization's exclusive legal control	?			
6	Did the organization inform all grantees, donors, an	nd donor advisors in writing that grant	funds can be used			
	only for charitable purposes and not for the benefit					
	conferring impermissible private benefit?		· · · · · · 🗌 Yes 🗌 No			
Par	Conservation Easements.					
	Complete if the organization answered "	Yes" on Form 990. Part IV. line 7.				
1	Purpose(s) of conservation easements held by the o					
-	Preservation of land for public use (for example, recreations)		f a historically important land area			
	☐ Protection of natural habitat	•	f a certified historic structure			
	☐ Preservation of open space	_ Treservation e				
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	n in the form of a conservation			
	easement on the last day of the tax year.		Held at the End of the Tax Year			
а						
b	Total acreage restricted by conservation easements		<del>- 1</del>			
C	Number of conservation easements on a certified hi					
d	Number of conservation easements included in (c) a					
_						
3	Number of conservation easements modified, trans		24			
3	tax year	ierred, released, extilliguished, or terri	illiated by the organization during the			
4	Number of states where property subject to conserv	vation assement is located				
4 5	Does the organization have a written policy regard		ection handling of			
Ū	violations, and enforcement of the conservation eas					
6	Staff and volunteer hours devoted to monitoring, inspec					
6	Stan and volunteer nours devoted to monitoring, inspec	ting, nandling of violations, and emorcing	conservation easements during the year			
-	Amount of our property in an article in the state of the	n bandina af vialationa and antausina a				
7	Amount of expenses incurred in monitoring, inspecting	g, nandling of violations, and enforcing of	conservation easements during the year			
0	Door and companiation accompant reported on line (	O(d) above estisfy the requirements of s	acation 170/b\/4\/D\/i\			
8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?					
0	In Part XIII, describe how the organization repo					
9	balance sheet, and include, if applicable, the text of					
	organization's accounting for conservation easemer		nariolal statements that describes the			
Dord			Other Cimilar Assets			
Par	Organizations Maintaining Collections		Jiner Similar Assets.			
4 -	Complete if the organization answered "					
та	If the organization elected, as permitted under FAS	•				
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
	•					
b	If the organization elected, as permitted under FAS					
	art, historical treasures, or other similar assets held		earch in furtherance of public service,			
	provide the following amounts relating to these item	15.				
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		\$			
	(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 FA	SB ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1 .		\$			
b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		\$			

Part III	Schedu	le D (Form 990) 2022								Pa	age 2
collection items (check all that apply): a	Part										
b   Scholarly research   e   Other	3			n, and other r	ecords, che	eck any of th	ne follov	wing that make	significan	t use o	of it
b   Scholarly research   e   Other	а	☐ Public exhibition			d 🗌 Loar	n or exchang	ge prog	ram			
c	b	☐ Scholarly research									
XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediany for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  11	С	☐ Preservation for future generations	;								
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? \( \text{ Yes} \) No Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV 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   \text{ No } \) If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance \( \text{ Amount } \) 1d \( \text{ 21,785} \) 1e \( \text{ 4ditions during the year} \) 1d \( \text{ 21,785} \) 1e \( \text{ 4ditions during the year} \) 1d \( \text{ 21,785} \) 1e \( \text{ 16ditions during the year} \) 1d \( \text{ 21,785} \) 1e \( \text{ 16ditions during the year} \) 1e \( \text{ 44,855} \) 1e \( \text{ 44,855} \) 1e \( \text{ 51,855} \) 1e \( \text{ 61,850} \) 1e	4		tion's coll	ections and e	xplain how	they further	the or	ganization's exe	mpt purp	ose in	Par
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?											
Part IV	5										
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?					as part of t	he organizat	ion's co	ollection?		es 🗌	No
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?  b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount	Part						_			_	
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 □ No □ Yes □ No □ Yes □ No □ Yes □ No □ No □ No □ Yes □ Yes □ No □ Yes □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ Yes □ No □ Yes □ Yes □ No □ Yes		•	answer	ed "Yes" on	Form 990,	Part IV, lin	e 9, or	reported an a	mount o	n Forn	U
included on Form 990, Part X?			4- ali		h =	fau aantuila.					
b If "Yes," explain the arrangement in Part XIII and complete the following table:    C   Beginning balance   1   C   380,000	1a										
c Beginning balance . 1d . 380,000 d Additions during the year . 1d . 21,78* e Distributions during the year . 1d . 21,78* e Distributions during the year . 1d . 48,55; f Ending balance . 1f . 48,55; f Ending balance . 1f . 48,55; J Ending balance . 1f . 48,55; d Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance . (a) Current year (b) Prior year (e) Two years back (e) Three years back (e) Four years back losses . (b) Contributions . (a) Current year (b) Prior year (e) Two years back (e) Four years back losses . (e) Four years back los									V Y	es 🗀	NC
c Beginning balance d'Additions during the year 1 1e 121,781 e Distributions during the year 1e 48,555 f Ending balance 1e de description include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes 18 16 16 179s, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes 18 16 16 179s," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes 18 16 16 179s, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes 18 16 16 179s, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes 18 16 179s, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes 18 16 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	D	ii res, explain the arrangement in Pa	art Alli ari	a complete tr	e rollowing	table:			\mount		
d Additions during the year e Distributions during the year 1	•	Paginning balance					1,		Amount	200	
e Distributions during the year											
f Ending balance		_ · · · · · · · · · · · · · · · · · · ·									
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?											•
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.    Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Beginning of year balance    b Contributions    c Net investment earnings, gains, and losses    d Grants or scholarships    e Other expenditures for facilities and programs    f Administrative expenses    g End of year balance    7 Form endowment    8 Board designated or quasi-endowment    9 Permanent endowment    7 Term endowment    8 Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (ii) Related organizations    (iii) Related organizations    5 If "Yes" on line 3q(ii), are the related organizations listed as required on Schedule R?    3a Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (e) Buildings    c Leasehold improvements    d Equipment    C Ditter (d) Book value (d) Book value (d) Equipment    C Leasehold improvements    d Equipment    C Ditter    C Diver    C Ditter    C Diver    C Di									v? V Y		
Part V Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Beginning of year balance  Contributions  Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  Permanent endowment  Permanent endowment  %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations  (ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Description of property  (a) Cost or other basis (cother)  (b) Prior years back (d) Three years back (e) Four years hack years and ye											
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    1			<u> </u>		io oxpianati	0111100 00011	ргота	<u> </u>			
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (c) Accumulated depreciation (d) Book value d Equipment c Leasehold improvements d Equipment c Other c Leasehold improvements d Equipment c Other c Description of property d Equipment c Other d Equipment c Other d Equipment c Other d Equipment d Equipment c Other d Description of property d Equipment d Equipment d Equipment d Equipment d Equipment d Other d Description of property d Equipment d Equipment d Equipment d Equipment d Description d Equipment d Equipm			answer	ed "Yes" on	Form 990,	Part IV, lin	e 10.				
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (other) (b) Buildings c Leasehold improvements d Equipment C Leasehold improvements  C Other C Term endowment funds C Schedule R? C Term endowment funds C Schedule R? C No Form 990, Part IV, line 11a. See Form 990, Part X, line 10. C Accumulated depreciation  1a Land C Leasehold improvements C Leasehold improvements C Leasehold improvements C Determine the control of the		, ,						(d) Three years bad	ck (e) Fou	r years b	ack
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (other) (b) Buildings c Leasehold improvements d Equipment C Leasehold improvements  C Other C Term endowment funds C Schedule R? C Term endowment funds C Schedule R? C No Form 990, Part IV, line 11a. See Form 990, Part X, line 10. C Accumulated depreciation  1a Land C Leasehold improvements C Leasehold improvements C Leasehold improvements C Determine the control of the	1a	Beginning of year balance									
c Net investment earnings, gains, and losses	b										
d Grants or scholarships	С	Net investment earnings, gains, and									
e Other expenditures for facilities and programs		losses									
f Administrative expenses . g End of year balance	d	Grants or scholarships									
f Administrative expenses	е	Other expenditures for facilities and									
g End of year balance		programs									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	f	Administrative expenses									
a Board designated or quasi-endowment	g										
b Permanent endowment  %  c Term endowment	2					Ig, column (a	a)) held	as:			
c Term endowment	а	Board designated or quasi-endowmer	nt	%							
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations	b		%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations	С										
organization by:  (i) Unrelated organizations	_										
(i) Unrelated organizations	3a		e possess	sion of the org	ganization t	hat are held	and ac	lministered for t	he		
(ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  Other		-							- m	Yes	No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?											
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  b Buildings  c Leasehold improvements  d Equipment  e Other  Other		• •									
Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Description of property  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Description of property  (d) Book value  (d) Book value  (e) Description of property  (d) Book value  (e) Description of property  (d) Book value  (e) Description of property  (f) Cost or other basis (other)  (other)  (other)		* *	-						30		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Buildings				yarıızation's 6	nuowment	iurius.					
Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Description of property  (d) Book value  (e) Description of property  (f) Accumulated depreciation  (h) Cost or other basis (other)  (other)  (other)  (h) Cost or other basis (other)  (other)  (other)  (other)	rait			ad "Vae" on	Form 000	Part IV lin	<u>م11ء</u>	See Form 900	Part Y	line 1	n
1a         Land         (investment)         (other)         depreciation           b         Buildings             c         Leasehold improvements             d         Equipment             e         Other		· · · · · · · · · · · · · · · · · · ·									
1a Land		Description of property	(a)		1				(a) Bo	JK VAIUĖ	
b         Buildings	19	Land		. ,		· · · · · · · · · · · · · · · · · · ·					
c         Leasehold improvements            d         Equipment            e         Other	_										
d         Equipment			. —								
e Other	_	-									
		• •									
				l Form 990. P	art X. colun	nn (B), line 1	0c.) .				

Part VII	Investments—Other Securities.	V line 11h Coo E		David V. Lina 10
	Complete if the organization answered "Yes" on Form 990, Part I  (a) Description of security or category	(b) Book value		ethod of valuation:
	(including name of security)	(b) Book value		nd-of-year market value
(1) Financial				
	eld equity interests			
(3) Other				
(B)				
(D)				
(F)				
(G) (H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.)   .   .			
Part VIII	Investments—Program Related.			
T dire VIII	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c See Fo	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		ethod of valuation:
	(a) Becomption of investment	(b) Book value		nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.	V P - 44 I O - E	000	D. IV. P 45
	Complete if the organization answered "Yes" on Form 990, Part I	v, line 11a. See F	orm 990,	
(4)	(a) Description			(b) Book value
(1)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		•	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See For	m 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (h) must squal Form 000. Part V sol. (D) line 05.)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)	ization's financial stat	· tements th	at reports the
	s liability for uncertain tax positions under FASB ASC 740. Check here if the text			

Schedule D (Form 990) 2022 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 62,812 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: Net unrealized gains (losses) on investments . . . . . . 0 Donated services and use of facilities 0 h Recoveries of prior year grants . . . . 0 Other (Describe in Part XIII.) . . . . . 0 Add lines 2a through 2d . . . . . . 2e 3 3 Subtract line **2e** from line **1** . . . . . 62,812 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 62,812 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . 1 16,144 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a 0 Prior year adjustments 2b 0 Other losses . . . . . . . . . . 2c 0 Other (Describe in Part XIII.) . . . . . 0 Add lines 2a through 2d . . . 2e 0 3 3 Subtract line 2e from line 1 . . . . . . . . 16,144 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 Other (Describe in Part XIII.) . . . . . . . . . . . . . . . 4b 0 Add lines **4a** and **4b** . . . . . . . . . . . 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 16,144 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part IV, Line 1b - Keweenaw Community Foundation holds Annuities, and these figures are Annuity Payment Liabilities. Schedule D, Part IV, Line 2b - Schedule D, Part IV, Line 2b - Annuity Liability Explanation: Annuity funds are funds reported as liabilities rather than net assets of the Foundation.

### **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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	Employer identification number
KEWEENAW COMMUNITY FOUNDATION	38-3223079
Form 990, Part VI, Section B, Line 11b - Form 990 Part VI, Section B, line 11b - The organization's process	to review Form 990: Reviewed
by Treasurer, Finance Committee, and Executive Director and Presented to the full board for approval.	
Form 990, Part VI, Section B, Line 12c - Form 990, Part VI, Section B, Line 12c - The conflict of Interest Poli	cy applies to trustees, volunteer
committee members, professional advisory council members and foundation staff. Questionnaires are con	npleted annually describing
business, association, or organizational relationships as well as any actual or proposed business dealing	s with the foundation which could
create a conflict of material interest or appearance of conflict. The board is responsible for reviewing pote	ntial conflicts, but anyone covered
by the policy is required to disclose the existence of, or potential, conflict of interest with any transaction	and refrain from personally
influencing board action on such a transaction, and recuse themselves from discussion or decisions on the	ne subject transaction.
Form 990, Part VI, Section B, Line 15 - Form 990, Part VI, Section B, Line 15a - Compensation process for t	
compensation policy of the foundation includes the review and approval by the board of compensation co	
comparable compensation for similar positions and geographic areas, and documentation of the executive	
compensation decisions. The foundation follows a yearly review process for other staff members - none o	f which fall under the IRS definition
of "key employee".	
Form 200 Dark VI Coation C. Line 10. Form 200 Dark VI Coation C. Line 10. Consuming Decision Decision and display	
Form 990, Part VI, Section C, Line 19 - Form 990, Part VI, Section C, Line 19 - Governing Documents disclo	sure Explanation: All policies,
governing documents, financial statements and Form 990 are available to the public upon request.	
Form 990, Part XI, Line 9 - Form 990, Part XI, Line 9 - Change in value of Split Interest Agreements =\$21,78	 1
10 m 776, 1 art XI, Line 7-10 m 776, 1 art XI, Line 7-0 mange in value of 3pin interest Agreements - \$\pi_21770	<u>!:</u>