Return of Organization Exempt From Income Tax

OMB No. 1545-0047 Open to Public Inspection

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. A For the 2023 calendar year, or tax year beginning JUL 1. 2023

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Adding chan chan chan chan fritia retur		C Name of organization NORTHWOOD TECHNICAL COLLEGE		D Employer identification number		
		rige FOUNDATION INC.				
		Doing business as	39-1313438			
		Number and street (or P.O. box if mail is not delivered to street address) 1900 COLLEGE DRIVE Room/suite				
				715-731-1265		
ated		City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 1,640,106.		
retu		RICE LAKE, WI 54868		H(a) Is this a group re		
tion		F Name and address of principal officer: SHAY HORTON		for subordinates? Yes X No		
		SAME AS C ABOVE		H(b) Are all subordinates included? Yes No		
-5.		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		If "No," attach a list. See instructions		
_	Webs				n number	
	art I	of organization; X Corporation Trust Association Other Summary	L Year	of formation: 1978 N	A State of legal domicile: WI	
	T					
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: WE STRENGTHEN COMMUNITIES BY				
		MPOWERING EACH STUDENT TO REALIZE THEIR SUCCESS STORY.				
	2	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)		3	11	
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	11	
ies	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5	0	
Activit	6	Total number of volunteers (estimate if necessary)			100	
	/ a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
	, I	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.	
Revenue		Contributions and arranta (D. 1940). It also	_	Prior Year	Current Year	
	8	Contributions and grants (Part VIII, line 1h)		405,552.	1,125,491.	
	9	Program service revenue (Part VIII, line 2g)		0.	0.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		315,211.	186,989.	
	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,670.	0.	
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		723,433.	1,312,480.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		303,867.	1,205,867.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.	
Expenses	108	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.	
	47	Total fundraising expenses (Part IX, column (D), line 25) 4,186		106 026	466 077	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		126,236.	166,375.	
	19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		430,103.	1,372,242.	
Jet Assets or		Revenue less expenses. Subtract line 18 from line 12		293,330.	-59,762.	
	20	Total assets (Part X, line 16)		inning of Current Year	End of Year	
	21	Total liabilities (Part X, line 16) Total liabilities (Part X, line 26)		5,843,655.	6,412,346.	
		Net assets or fund balances. Subtract line 21 from line 20		56,251.	67,155.	
Pa	rt II	Signature Block		5,787,404.	6,345,191.	
_	_	lities of perjyry, I declare that I have examined this return, including accompanying schedules a	nd atataman	do and to the best of sec	111 111 111	
rue.	corre	et, and complete. Declaration of prepare; (other than officer) is based on all information of which	nu statemen	as and to the best of my	knowledge and belief, it is	
,		VI I I I I I I I I I I I I I I I I I I	ii preparei fi	as any knowledge.		
Sign Here		Signature of officer		Date		
		HAY HORTON, PRESIDENT				
		Type or print name and title				
		rint/Type preparer's name Preparer's signature Date Check PTIN				
Paid Preparer Use Only		ICHAEL J PETERSON, CPA MICHAEL J PETERSON, 01/27/25 self-employed P01833529				
		Firm's name WIPFLI LLP	July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		Firm's address 1502 LONDON ROAD, SUITE 200				
	-	DULUTH, MN 55812		Phone no 218	3.722.4705	
Лау	the IF	RS discuss this return with the preparer shown above? See instructions		I'r none no. Z I C	X Yes No	
_		The state of the s			IOO INO	