Form **990-PF**
Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ **Do not enter social security numbers on this form as it may be made public.**
▶ **Go to *www.irs.gov/Form990PF* for instructions and the latest information.**

OMB No. 1545-0047

2023

Open to Public Inspection

For calendar year 2023, or tax year beginning 01-01-2023 , and ending 12-31-2023

Name of foundation
IOWA WEST FOUNDATION

A Employer identification number
42-1391990

Number and street (or P.O. box number if mail is not delivered to street address)
4201 RIVERS EDGE PARKWAY 400

Room/suite

B Telephone number (see instructions)
(712) 309-3010

City or town, state or province, country, and ZIP or foreign postal code
COUNCIL BLUFFS, IA 51501

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

H Check type of organization: ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 492,648,687

J Accounting method: ☐ Cash ☑ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	8,558,327			
	2 Check ▶☐ if the foundation is **not** required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	6,753,201	6,753,201		
	5a Gross rents	145,508	149,522		
	b Net rental income or (loss) 145,508				
	6a Net gain or (loss) from sale of assets not on line 10	5,059,172			
	b Gross sales price for all assets on line 6a 21,506,539				
	7 Capital gain net income (from Part IV, line 2)		4,254,060		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	5,395,418	5,513,653		
	12 **Total.** Add lines 1 through 11	25,911,626	16,670,436		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	316,202	14,459		301,743
	14 Other employee salaries and wages	782,631	11,939		770,692
	15 Pension plans, employee benefits	376,486	7,054		369,432
	16a Legal fees (attach schedule)	44,387	0		44,387
	b Accounting fees (attach schedule)	164,752	58,052		106,700
	c Other professional fees (attach schedule)	2,149,143	2,043,031		17,750
	17 Interest	673,699	0		673,699
	18 Taxes (attach schedule) (see instructions)	1,025,830	0		0
	19 Depreciation (attach schedule) and depletion	2,055,645	0		
	20 Occupancy	318,520	0		318,520
	21 Travel, conferences, and meetings	34,977	0		34,977
	22 Printing and publications	196,856	0		196,856
	23 Other expenses (attach schedule)	602,477	75,635		526,841
	24 **Total operating and administrative expenses.** Add lines 13 through 23	8,741,605	2,210,170		3,361,597
	25 Contributions, gifts, grants paid	14,443,978			16,667,094
	26 **Total expenses and disbursements.** Add lines 24 and 25	23,185,583	2,210,170		20,028,691
	27 Subtract line 26 from line 12:				
	a **Excess of revenue over expenses and disbursements**	2,726,043			
	b **Net investment income** (if negative, enter -0-)		14,460,266		
	c **Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	2,729,499	1,330,737	1,330,737
	2 Savings and temporary cash investments	5,607,977	14,511,700	14,511,700
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ 52,712			
	Less: allowance for doubtful accounts ▶	152,712	52,712	52,712
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ 12,168,531			
	Less: allowance for doubtful accounts ▶ 0	12,089,083	12,168,531	12,168,531
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	156,082,858	168,561,267	168,561,267
	c Investments—corporate bonds (attach schedule)	22,645,237	28,431,705	28,431,705
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	206,900,911	216,556,201	216,556,201
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)	55,433,504	51,035,834	51,035,834
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	461,641,781	492,648,687	492,648,687
Liabilities	17 Accounts payable and accrued expenses	1,311,533	2,668,985	
	18 Grants payable	15,498,083	11,414,954	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)	18,118,554	16,844,262	
	22 Other liabilities (describe ▶)	1,242,866	1,059,262	
	23 **Total liabilities**(add lines 17 through 22)	36,171,036	31,987,463	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here** ▶ ☑ **and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions	425,470,745	460,661,224	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ **and complete lines 26 through 30.**			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 **Total net assets or fund balances** (see instructions)	425,470,745	460,661,224	
	30 **Total liabilities and net assets/fund balances** (see instructions)	461,641,781	492,648,687	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	425,470,745
2	Enter amount from Part I, line 27a	2	2,726,043
3	Other increases not included in line 2 (itemize) ▶	3	33,755,240
4	Add lines 1, 2, and 3	4	461,952,028
5	Decreases not included in line 2 (itemize) ▶	5	1,290,804
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	460,661,224

12	Standard deduction or itemized deductions (from Schedule A)	12
13	Qualified business income deduction. Attach Form 8995 or Form 8995-A	13
14	Add lines 12 and 13	14
15	Subtract line 14 from line 11. If zero or less, enter -0-	15
16	Tax (see instructions). Check if any from: 1 ☐ Form(s) 8814 2 ☐ Form 4972 3 ☐	16
17	Amount from Schedule 2, line 3	17
18	Add lines 16 and 17	18
19	Child tax credit or credit for other dependents from Schedule 8812	19
20	Amount from Schedule 3, line 8	20
21	Add lines 19 and 20	21
22	Subtract line 21 from line 18. If zero or less, enter -0-	22
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23
24	Add lines 22 and 23. This is your total tax	24
25	Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions)	25
26	2024 estimated tax payments and amount applied from 2023 return	26
27	Earned income credit (EIC)	27
28	Additional child tax credit from Schedule 8812	28
29	American opportunity credit from Form 8863, line 8	29
30	Reserved for future use	30
31	Amount from Schedule 3, line 15	31
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32
33	Add lines 25, 26, and 32. These are your total payments	33
34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34
35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here ☐	35a
b	Routing number	
c	Type: ☐ Checking ☐ Savings	
d	Account number	
36	Amount of line 34 you want applied to your 2025 estimated tax	36
37	Amount you owe. Subtract line 33 from line 24. For details on how to pay, see instructions	37
38	Estimated tax penalty (see instructions)	38

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

Joint return? See instructions. Keep a copy for your records.

Your signature | Date | Your occupation | If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, both must sign. | Date | Spouse's occupation | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. | Email address

Paid Preparer Use Only

Preparer's name | Preparer's signature | Date | PTIN | Check if: ☐ Self-employed

Firm's name | Phone no.

Firm's address | Firm's EIN

Go to www.irs.gov/Form1040 for instructions and the latest information.

1	Foreign tax credit from Schedule 3, line 1	1
2	Child and dependent care credit from Schedule 3, line 2	2
3	Add lines 1 and 2	3
4	Subtract line 3 from line 18. If zero or less, enter -0-	4
5	Other taxes, including self-employment tax, from Schedule 2, line 21	5
6	Add lines 4 and 5. This is your total tax	6
7	Federal income tax withheld from: a Form(s) W-2 b Form(s) 1099 c Other forms (see instructions)	7
8	2024 estimated tax payments and amount applied from 2023 return	8
9	Earned income credit (EIC)	9
10	Additional child tax credit from Schedule 8812	10
11	American opportunity credit from Form 8863, line 8	11
12	Reserved for future use	12
13	Amount from Schedule 3, line 15	13
14	Add lines 9, 10, 11, and 13. These are your total other payments and refundable credits	14
15	Add lines 7, 8, and 14. These are your total payments	15
16	If line 15 is more than line 6, subtract line 6 from line 15. This is the amount you overpaid	16
17a	Amount of line 16 you want refunded to you. If Form 8888 is attached, check here ☐	17a
b	Routing number	
c	Type: ☐ Checking ☐ Savings	
d	Account number	
18	Amount of line 16 you want applied to your 2025 estimated tax	18
19	Amount you owe. Subtract line 15 from line 6. For details on how to pay, see instructions	19
20	Estimated tax penalty (see instructions)	20

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

Joint return? See instructions. Keep a copy for your records.

Your signature | Date | Your occupation | If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, both must sign. | Date | Spouse's occupation | If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. | Email address

Paid Preparer Use Only

Preparer's name | Preparer's signature | Date | PTIN | Check if: ☐ Self-employed

Firm's name | Phone no.

Firm's address | Firm's EIN

Go to www.irs.gov/Form1040 for instructions and the latest information.

Part VI-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition.	1b		No
	*If the answer is "Yes" to **1a** or **1b,** attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0 **(2)** On foundation managers. ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XIV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the taxable year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WWW.IOWAWESTFOUNDATION.ORG

14 The books are in care of ▶ JACKIE DIX Telephone no. ▶ (712) 309-3010

Located at ▶ 4201 RIVERS EDGE PARKWAY STE 400 COUNCIL BLUFFS IA ZIP+4 ▶ 51501

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

			Yes	No
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16		No

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)		No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)		No
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(6)		No
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
c	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023?	1d		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023?	2a		No
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	Yes	
b	If "Yes," did it have excess business holdings in 2023 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969; **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2023.)*	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023?	4b		No

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)		No
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)		No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		No
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)	Yes	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)		No
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b	Yes	
c	Organizations relying on a current notice regarding disaster assistance check ▶ ☐			
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	5d	Yes	
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a		No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		No
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	8		No

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TARA SLEVIN 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	CHAIR 1.00	0	0	0
TAMMY PAVICH 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	VICE CHAIR 1.00	0	0	0
AMY CRAWFORD 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	SECRETARY/TREASURER 1.00	0	0	0
RON DICKINSON 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
MATT GRONSTAL 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
JASON JAMES 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
KIRK MADSEN 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
JACK RUESCH 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
VERGARIE SANFORD 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	BOARD MEMBER 1.00	0	0	0
BRENDA MAINWARING 4201 RIVERS EDGE PARKWAY 400 COUNCIL BLUFFS, IA 51501	PRESIDENT & CEO 40.00	316,202	45,492	6,000

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MATTHEW HENKES 4201 RIVERS EDGE PKWY SUITE 400 COUNCIL BLUFFS,IA 51501	VP GRANTS&ADMIN 40.00	165,250	31,718	0
TIMOTHY GALLIGAN 4201 RIVERS EDGE PKWY SUITE 400 COUNCIL BLUFFS,IA 51501	PROGRAM OFFICER 40.00	136,250	51,682	0
JACKIE DIX 4201 RIVERS EDGE PKWY SUITE 400 COUNCIL BLUFFS,IA 51501	CONTROLLER 35.00	119,387	47,789	0
MICHELLE WODTKE-FRANKS 4201 RIVERS EDGE PKWY SUITE 400 COUNCIL BLUFFS,IA 51501	PROGRAM OFFICER 30.00	104,500	43,475	0
STACEY GOODMAN 4201 RIVERS EDGE PKWY SUITE 400 COUNCIL BLUFFS,IA 51501	PROGRAM OFFICER 40.00	101,000	13,331	0

Total number of other employees paid over $50,000 ▶ 2

Part VII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
MULHALL'S 3615 N 120TH STREET OMAHA,NE 68164	CONSTRUCTION/MAINT	323,667
MERCER INVESTMENT CONSULTANTS 701 MARKET STREET SUITE 1100 ST LOUIS,MO 63101	INVESTMENT SERVICES	311,250
SHERBONDY'S 319 16TH AVENUE COUNCIL BLUFFS,IA 51503	STREETSCAPE MAINT	244,708
KPMG LLP 1212 NORTH 96TH STREET SUITE 300 OMAHA,NE 68114	ACCOUNTING SERVICES	170,050
TANDEM WORKS 116 WEST BROADWAY COUNCIL BLUFFS,IA 51503	PUBLIC RELATIONS	96,694

Total number of others receiving over $50,000 for professional services. . . . . ▶

1

Part VIII- Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 CITY OF COUNCIL BLUFFS STREETSCAPE MAINTENANCE (CASH PAID)	493,813
2 BELONGING MINI-GRANTS AND CONTINGENCY FUND	296,392
3 SOUTHWEST IOWA COVID-19 RELIEF FUND	25,000
4	

Part VIII- Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3 . . . . . ▶	0

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities		1a	395,171,054
b	Average of monthly cash balances		1b	13,531,457
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	408,702,511
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	408,702,511
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)		4	6,130,538
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3		5	402,571,973
6	**Minimum investment return.** Enter 5% (0.05) of line 5		6	20,128,599

Part X **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part IX, line 6		1	20,128,599
2a	Tax on investment income for 2022 from Part V, line 5	2a 200,998		
b	Income tax for 2022. (This does not include the tax from Part V.)	2b		
c	Add lines 2a and 2b		2c	200,998
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	19,927,601
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	19,927,601
6	Deduction from distributable amount (see instructions)		6	0
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1		7	19,927,601

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26		1a	20,028,691
b	Program-related investments—total from Part VIII-B		1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part XII, line 4		4	20,028,691

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				19,927,601
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2022 only			0	
b Total for prior years: 20 ___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2022:				
a From 2018 2,607,681				
b From 2019 11,064,256				
c From 2020 2,539,584				
d From 2021				
e From 2022				
f **Total** of lines 3a through e	16,211,521			
4 Qualifying distributions for 2023 from Part XI, line 4: ▶ $ 20,028,691				
a Applied to 2022, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions)		0		
c Treated as distributions out of corpus (Election required—see instructions)	0			
d Applied to 2023 distributable amount				19,927,601
e Remaining amount distributed out of corpus	101,090			
5 Excess distributions carryover applied to 2023. *(If an amount appears in column (d), the same amount must be shown in column (a).)*	0			0
6 **Enter the net total of each column as indicated below:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	16,312,611			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions)	2,607,681			
9 **Excess distributions carryover to 2024.** Subtract lines 7 and 8 from line 6a	13,704,930			
10 Analysis of line 9:				
a Excess from 2019 11,064,256				
b Excess from 2020 2,539,584				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023 101,090				

Part XIII **Private Operating Foundations** (see instructions and Part VI-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling . . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2023	**(b)** 2022	**(c)** 2021	**(d)** 2020	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part IX, line 6 for each year listed . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part **Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

IOWA WEST FOUNDATION
4201 RIVERS EDGE PARKWAY SUITE 400
COUNCIL BLUFFS,IA 51501
(712) 325-3133
JACKIEDIX@IWF.ORG

b The form in which applications should be submitted and information and materials they should include:

HTTPS://WWW.IOWAWESTFOUNDATION.ORG/GRANTMAKING/APPLICATION-PROCESS/

c Any submission deadlines:

HTTPS://WWW.IOWAWESTFOUNDATION.ORG/GRANTMAKING/APPLICATION-PROCESS/

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

HTTPS://WWW.IOWAWESTFOUNDATION.ORG/GRANTMAKING/WHAT-WE-FUND/

Table S1. Characteristics of Participants by Year of Approval for Active Treatment

Characteristic	Year of Approval for Active Treatment				
	2011 (n=1,000)	2012 (n=1,000)	2013 (n=1,000)	2014 (n=1,000)	Overall (n=4,000)
Age, mean (SD), years	54.2 (12.1)	54.5 (12.3)	54.8 (12.0)	55.1 (12.2)	54.7 (12.2)
Female, n (%)	512 (51.2)	498 (49.8)	505 (50.5)	489 (48.9)	2004 (50.1)
Race/ethnicity, n (%)					
White	612 (61.2)	598 (59.8)	605 (60.5)	589 (58.9)	2404 (60.1)
Black	201 (20.1)	210 (21.0)	198 (19.8)	205 (20.5)	814 (20.4)
Hispanic	134 (13.4)	128 (12.8)	140 (14.0)	132 (13.2)	534 (13.4)
Other	53 (5.3)	64 (6.4)	57 (5.7)	74 (7.4)	248 (6.2)
Baseline HbA1c, mean (SD), %	8.4 (1.2)	8.3 (1.1)	8.5 (1.2)	8.4 (1.2)	8.4 (1.2)
Baseline eGFR, mean (SD), mL/min/1.73 m²	78.6 (18.4)	79.2 (18.1)	77.9 (18.7)	78.4 (18.5)	78.5 (18.4)
Duration of diabetes, mean (SD), years	9.8 (6.5)	10.1 (6.7)	9.9 (6.6)	10.2 (6.8)	10.0 (6.7)
Prior metformin use, n (%)	842 (84.2)	851 (85.1)	838 (83.8)	847 (84.7)	3378 (84.5)
Prior sulfonylurea use, n (%)	521 (52.1)	534 (53.4)	518 (51.8)	529 (52.9)	2102 (52.6)
Prior insulin use, n (%)	312 (31.2)	328 (32.8)	315 (31.5)	331 (33.1)	1286 (32.2)
Prior GLP-1 receptor agonist use, n (%)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)
Prior SGLT2 inhibitor use, n (%)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)
Current smoker, n (%)	198 (19.8)	205 (20.5)	201 (20.1)	208 (20.8)	812 (20.3)
Hypertension, n (%)	781 (78.1)	792 (79.2)	785 (78.5)	796 (79.6)	3154 (78.9)
Dyslipidemia, n (%)	743 (74.3)	751 (75.1)	748 (74.8)	756 (75.6)	2998 (75.0)
Coronary artery disease, n (%)	214 (21.4)	221 (22.1)	218 (21.8)	225 (22.5)	878 (22.0)
Heart failure, n (%)	96 (9.6)	101 (10.1)	98 (9.8)	104 (10.4)	399 (10.0)
Peripheral neuropathy, n (%)	287 (28.7)	294 (29.4)	290 (29.0)	298 (29.8)	1169 (29.2)
Retinopathy, n (%)	312 (31.2)	318 (31.8)	315 (31.5)	321 (32.1)	1266 (31.7)
Nephropathy, n (%)	178 (17.8)	184 (18.4)	181 (18.1)	187 (18.7)	730 (18.3)
Baseline statin use, n (%)	612 (61.2)	624 (62.4)	618 (61.8)	631 (63.1)	2485 (62.1)
Baseline ACE inhibitor or ARB use, n (%)	698 (69.8)	705 (70.5)	701 (70.1)	712 (71.2)	2816 (70.4)
Baseline aspirin use, n (%)	401 (40.1)	412 (41.2)	408 (40.8)	418 (41.8)	1639 (41.0)
Baseline beta-blocker use, n (%)	356 (35.6)	362 (36.2)	359 (35.9)	365 (36.5)	1442 (36.1)
Baseline calcium channel blocker use, n (%)	289 (28.9)	294 (29.4)	291 (29.1)	297 (29.7)	1171 (29.3)
Baseline diuretic use, n (%)	312 (31.2)	318 (31.8)	315 (31.5)	321 (32.1)	1266 (31.7)
Baseline proton pump inhibitor use, n (%)	401 (40.1)	412 (41.2)	408 (40.8)	418 (41.8)	1639 (41.0)
Baseline antidepressant use, n (%)	178 (17.8)	184 (18.4)	181 (18.1)	187 (18.7)	730 (18.3)
Baseline opioid use, n (%)	134 (13.4)	138 (13.8)	136 (13.6)	140 (14.0)	548 (13.7)
Baseline corticosteroid use, n (%)	89 (8.9)	92 (9.2)	91 (9.1)	94 (9.4)	366 (9.2)
Baseline antipsychotic use, n (%)	67 (6.7)	69 (6.9)	68 (6.8)	70 (7.0)	274 (6.9)
Baseline benzodiazepine use, n (%)	112 (11.2)	115 (11.5)	113 (11.3)	117 (11.7)	457 (11.4)
Baseline anticoagulant use, n (%)	78 (7.8)	80 (8.0)	79 (7.9)	81 (8.1)	318 (8.0)
Baseline antiplatelet use, n (%)	401 (40.1)	412 (41.2)	408 (40.8)	418 (41.8)	1639 (41.0)
Baseline urinary tract infection, n (%)	156 (15.6)	160 (16.0)	158 (15.8)	162 (16.2)	636 (15.9)
Baseline genital infection, n (%)	89 (8.9)	92 (9.2)	91 (9.1)	94 (9.4)	366 (9.2)
Baseline pancreatitis, n (%)	23 (2.3)	24 (2.4)	24 (2.4)	25 (2.5)	96 (2.4)
Baseline malignancy, n (%)	134 (13.4)	138 (13.8)	136 (13.6)	140 (14.0)	548 (13.7)
Baseline fracture, n (%)	67 (6.7)	69 (6.9)	68 (6.8)	70 (7.0)	274 (6.9)
Baseline amputation, n (%)	34 (3.4)	35 (3.5)	35 (3.5)	36 (3.6)	140 (3.5)
Baseline dialysis, n (%)	12 (1.2)	12 (1.2)	12 (1.2)	13 (1.3)	49 (1.2)
Baseline kidney transplant, n (%)	5 (0.5)	5 (0.5)	5 (0.5)	5 (0.5)	20 (0.5)
Baseline liver disease, n (%)	45 (4.5)	46 (4.6)	46 (4.6)	47 (4.7)	184 (4.6)
Baseline alcohol use disorder, n (%)	56 (5.6)	58 (5.8)	57 (5.7)	59 (5.9)	230 (5.8)
Baseline substance use disorder, n (%)	34 (3.4)	35 (3.5)	35 (3.5)	36 (3.6)	140 (3.5)
Baseline depression, n (%)	178 (17.8)	184 (18.4)	181 (18.1)	187 (18.7)	730 (18.3)
Baseline anxiety disorder, n (%)	134 (13.4)	138 (13.8)	136 (13.6)	140 (14.0)	548 (13.7)
Baseline suicidal ideation, n (%)	12 (1.2)	12 (1.2)	12 (1.2)	13 (1.3)	49 (1.2)
Baseline hospitalization in prior 12 months, n (%)	201 (20.1)	207 (20.7)	204 (20.4)	210 (21.0)	822 (20.6)
Baseline emergency department visit in prior 12 months, n (%)	178 (17.8)	184 (18.4)	181 (18.1)	187 (18.7)	730 (18.3)
Baseline outpatient visit in prior 12 months, n (%)	912 (91.2)	921 (92.1)	916 (91.6)	925 (92.5)	3674 (91.9)
Baseline laboratory test in prior 12 months, n (%)	978 (97.8)	982 (98.2)	980 (98.0)	984 (98.4)	3924 (98.1)
Baseline imaging in prior 12 months, n (%)	401 (40.1)	412 (41.2)	408 (40.8)	418 (41.8)	1639 (41.0)
Baseline electrocardiogram in prior 12 months, n (%)	356 (35.6)	362 (36.2)	359 (35.9)	365 (36.5)	1442 (36.1)
Baseline echocardiogram in prior 12 months, n (%)	178 (17.8)	184 (18.4)	181 (18.1)	187 (18.7)	730 (18.3)
Baseline stress test in prior 12 months, n (%)	134 (13.4)	138 (13.8)	136 (13.6)	140 (14.0)	548 (13.7)
Baseline cardiac catheterization in prior 12 months, n (%)	89 (8.9)	92 (9.2)	91 (9.1)	94 (9.4)	366 (9.2)
Baseline coronary revascularization in prior 12 months, n (%)	67 (6.7)	69 (6.9)	68 (6.8)	70 (7.0)	274 (6.9)
Baseline peripheral revascularization in prior 12 months, n (%)	34 (3.4)	35 (3.5)	35 (3.5)	36 (3.6)	140 (3.5)
Baseline amputation in prior 12 months, n (%)	12 (1.2)	12 (1.2)	12 (1.2)	13 (1.3)	49 (1.2)
Baseline dialysis in prior 12 months, n (%)	5 (0.5)	5 (0.5)	5 (0.5)	5 (0.5)	20 (0.5)
Baseline kidney transplant in prior 12 months, n (%)	2 (0.2)	2 (0.2)	2 (0.2)	2 (0.2)	8 (0.2)
Baseline liver transplant in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline lung transplant in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline heart transplant in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline bone marrow transplant in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline solid organ transplant in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline hematologic malignancy in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline solid malignancy in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline metastatic malignancy in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline hospice in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline palliative care in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline advance directive in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline power of attorney in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline guardianship in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline conservatorship in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline representative payee in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline trust in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline will in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline living will in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline do not resuscitate order in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline do not intubate order in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline comfort care order in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline withdrawal of life support in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)
Baseline death in prior 12 months, n (%)	1 (0.1)	1 (0.1)	1 (0.1)	1 (0.1)	4 (0.1)

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	6,753,201	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	531310	-4,014	16	149,522	
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	5,059,172	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a HOTEL FEES & TAX			18	238,092	
b FIELD HOUSE - PROGRAM REVENUE			18	262,303	
c PARTNERSHIP INCOME	523000	-145,740	18	5,040,763	
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		-149,754		17,503,053	0
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				**13**	17,353,299

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Part XVI Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No.	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule.

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

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

2024-11-13

Signature of officer or trustee — Date — Title

May the IRS discuss this return with the preparer shown below? See instructions. ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
HOLLY K MOEN		2024-11-13		P01800653

Firm's name ▶ KPMG LLP — Firm's EIN ▶ 13-5565207

Firm's address ▶ 350 N 5TH ST SUITE 600, MINNEAPOLIS, MN 55402 — Phone no. (612) 305-5608

Additional Data

Return to Form

Software ID:
Software Version:

Form 990PF - Special Condition Description:

Special Condition Description

Schedule B

(Form 990)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2023

Name of the organization
IOWA WEST FOUNDATION

Employer identification number
42-1391990

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33$^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
IOWA WEST FOUNDATION

Employer identification number
42-1391990

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	IOWA WEST RACING ASSOCIATION 25 MAIN PLACE SUITE 550 COUNCIL BLUFFS, IA 51503	$ 7,450,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
2	HARRAH'S COUNCIL BLUFFS CASINO AND HOTEL 2701 23RD AVENUE COUNCIL BLUFFS, IA 51501	$ 75,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
IOWA WEST FOUNDATION

Employer identification number
42-1391990

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization
IOWA WEST FOUNDATION

Employer identification number
42-1391990

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ **$** _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

Additional Data

Return to Form

Software ID:

Software Version:

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	164,752	58,052		106,700

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
FAST BREAK SPORTS IOWA LLC (DBA OMAHA SPORTS ACADEMY) (OSA)	5 ARENA WAY COUNCIL BLUFFS, IA 51501	2023-01-01	1	GRANT TO FAST BREAK SPORTS IOWA, LLC (DBA OMAHA SPORTS ACADEMY) (OSA) FOR A $1 PER YEAR LEASE OF A FIELDHOUSE FACILITY CONSTRUCTED AND BUILT BY IOWA WEST FOUNDATION, WITH FUNDING FROM THE CITY OF COUNCIL BLUFFS, TO BE OPERATED BY OSA AS A COMMUNITY RECREATIONAL CENTER IN A CHARITABLE MANNER. THE LEASED PROPERTY CONSISTS OF 66,150 USABLE SQUARE FEET AND ASSOCIATED PARKING AREA. THIS WAS MADE IN COMPLIANCE WITH IOWA WEST FOUNDATION'S COMMITMENT TO THE CITY OF COUNCIL BLUFFS UNDER AN AGREEMENT FOR PRIVATE DEVELOPMENT TO DEVELOP A DECLINING AREA IN THE CITY KNOWN AS THE MID-AMERICA CENTER. THE GRANT OF NOMINAL RENT UNDER THE SPORTS LEASE AND OPERATING AGREEMENT, EXECUTED IN JANUARY, 2017, ALONG WITH A SUPPLEMENTAL COMPLIANCE AGREEMENT, WAS MADE, WITH APPROVAL OF THE CITY, TO REQUIRE OSA TO OPERATE THE FACILITY IN A NONDISCRIMINATORY, NONCOMMERCIAL MANNER FOR THE BENEFIT OF THE PUBLIC, AND IN COMPLIANCE WITH IWF'S EXPENDITURE RESPONSIBILITIES.		THERE IS NO DIVERSION OF THE USE OF THE FACILITY FOR NON-CHARITABLE PURPOSES	COMMUNITY USE REPORTS ARE SUBMITTED QUARTERLY		

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Identifier	Return Reference	Explanation
	FORM 990PF, PART VI-B, LINE 3A	INTERNAL REVENUE CODE SECTIONS (IRC) 4943 STATES THAT THE PERMITTED HOLDINGS OF ANY PRIVATE FOUNDATION IN AN INCORPORATED BUSINESS ENTERPRISE IS 20 PERCENT OF THE VOTING STOCK, REDUCE BY THE PERCENTAGE OF THE VOTING STOCK OWNED BY ALL DISQUALIFIED PERSONS. IN ADDITION, A BUSINESS WHICH DERIVES MORE THAN 95 PERCENT OF ITS GROSS INCOME FROM PASSIVE SOURCES WILL NOT CONSTITUTE A BUSINESS ENTERPRISE WITHIN THE MEANING OF IRC 4943, AND A FOUNDATION'S INVESTMENTS IN SUCH AN ENTITY WILL NOT CONSTITUTE AN IRC 4943 BUSINESS HOLDING. IOWA WEST FOUNDATION HOLDS VARIOUS OWNERSHIP IN INCORPORATED BUSINESS ENTERPRISES; HOWEVER, EACH HOLDING MEETS THE ABOVE DISCUSSED EXCEPTIONS RELATING TO EXCESS BUSINESS HOLDINGS.

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VBTIX $9.48 VANGUARD TOTAL BD MKT IDX INSTL CL #222	21,303,891	21,303,891
MERCER OPPORTUNISTIC FIXED INCOME FD CL Y-3	7,127,814	7,127,814

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VITSX $93.12 VANGUARD TOTAL STOCK MARKET INDEX FD CLASS I #855	73,190,491	73,190,491
VTMNX $13.53 VANGUARD DEVELOPED MARKETS INDEX FUND - INST #137	28,025,238	28,025,238
MERCER NON-US CORE EQUITY FD CL Y-3	21,349,484	21,349,484
MERCER EMERGING MARKETS EQUITY FD CL Y-3	20,341,905	20,341,905
POSIX $8.60 PRINCIPAL GLOBAL REAL ESTATE SECURITEIS FUND - INS #4905	11,818,663	11,818,663
NSIT $100.27 INSIGHT ENTERPRISES INC COM	513,851	513,851
ESI $18.19 ELEMENT SOLUTIONS INC COM	492,072	492,072
FAF $52.34 FIRST AMERN FINL CORP COM	328,966	328,966
WAL $65.79 WESTERN ALLIANCE BANCORPORATION COM	323,029	323,029
CNM $19.31 CORE & MAIN INC CL A	319,037	319,037
IBP $85.60 INSTALLED BLDG PRODS INC COM	317,193	317,193
CMA $55.81 COMERICA INC COM	311,978	311,978
FN $128.22 FABRINET SHS	288,350	288,350
BECN $52.79 BEACON ROOFING SUPPLY INC COM	274,113	274,113
ZION $43.87 ZIONS BANCORPORATION N A COM	270,459	270,459
KEX $64.35 KIRBY CORP COM	267,617	267,617
JBI $13.05 JANUS INTL GROUP INC COM	265,829	265,829
STAG $32.31 STAG INDL INC COM	260,686	260,686
LSTR $162.90 LANDSTAR SYS INC COM	255,618	255,618
RMBS $35.823 RAMBUS INC DEL COM	253,208	253,208
ALG $141.60 ALAMO GROUP INC COM	252,228	252,228
NNN $43.10 NNN REIT INC COM	239,421	239,421
GATX $106.34 GATX CORP COM	238,036	238,036
SKY $74.26 CHAMPION HOMES INC COM	235,033	235,033
NSA $36.12 NATIONAL STORAGE AFFILIATES TR COM SHS BEN IN	234,928	234,928
WMS $81.97 ADVANCED DRAIN SYS INC DEL COM	229,946	229,946
SR $68.86 SPIRE INC COM	226,294	226,294
PB $67.73 PROSPERITY BANCSHARES INC COM	219,784	219,784
AEIS $91.06 ADVANCED ENERGY INDS INC COM	218,929	218,929
ASGN $81.48 ASGN INC COM	216,863	216,863
CADE $24.66 CADENCE BK	215,711	215,711
AXTA$33.97 AXALTA COATING SYSTEMS LTD	211,803	211,803
CC $30.62 CHEMOURS CO COM	207,376	207,376
SIGI $86.61 SELECTIVE INS GROUP INC COM	205,426	205,426
UBSI $40.49 UNITED BANKSHARES INC W VA COM	203,521	203,521
PR $13.70 PERMIAN RESOURCES CORP CLASS A COM	202,232	202,232
MC $38.37 MOELIS & CO CL A	201,507	201,507
SIG $107.26 SIGNET JEWELERS LTD	201,113	201,113
KFRC $54.83 KFORCE INC COM	198,626	198,626
APAM $29.70 ARTISAN PARTNERS ASSET MGMT IN CL A	197,485	197,485
SAIA $209.68 SAIA INC COM	190,626	190,626

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COKE $928.40 COCA COLA BOTTLIN CO CONS COM	190,322	190,322
RRR $53.33 RED ROCK RESORTS INC COM	189,588	189,588
RUSHA $52.28 RUSH ENTERPRISES INC CL A	187,770	187,770
MUR $42.66 MURPHY OIL CORP COM	186,424	186,424
GMED $53.29 GLOBUS MED INC A COM	186,249	186,249
CHRD $166.23 CHORD ENERGY CORPORATION COM	183,684	183,684
AGNC $9.81 AGNC INVESTMENT CORP COM	183,251	183,251
IGT $22.68 INTERNATIONAL GAME TECH PLC SHS USD	182,688	182,688
MTDR $56.86 MATADOR RESOURCES CO COM	166,600	166,600
GIL $33.06 GILDAN ACTIVEWEAR INC	163,647	163,647
EQC $19.20 EQUITY COMMONWEALTH COM	148,512	148,512
MTRN $130.13 MATERION CORP COM	148,348	148,348
MFA $9.85 MFA FINL INC COM	148,201	148,201
VVV $37.58 VALVOLINE INC COM	148,065	148,065
AVTR $21.09 AVANTOR INC COM	138,806	138,806
PTEN $16.84 PATTERSON-UTI ENERGY INC COM	136,836	136,836
FELE $79.75 FRANKLIN ELEC INC COM	135,793	135,793
AMED $95.06 AMEDISYS INC COM	129,282	129,282
FSS $46.47 FEDERAL SIGNAL CORP COM	123,168	123,168
ASO $66,00 ACADEMY SOORTS OUTDOORS INC COM	123,090	123,090
MGRC $119.62 MCGRATH RENTCORP COM	120,218	120,218
ACHC $77.76 ACADIA HEALTHCARE CO INC COM	114,696	114,696
ONB $17.98 OLD NATL BANCORP IND COM	112,910	112,910
PMT $12.39 PENNYMAC MTG INVT TR COM	111,602	111,602
AAON $73.87 AAON INC COM	107,850	107,850
VMI $233.51 VALMONT INDUSTRIES INC COM	106,247	106,247
COTY $8.56 COTY INC COM CL A	104,949	104,949
FL $31.15 FOOT LOCKER INC COM	98,434	98,434
UCTT $33.15 ULTRA CLEAN HLDGS INC COM	89,618	89,618
MATV $15.31 MATIV HOLDINGS INC COM	81,679	81,679
AR $30.99 ANTERO RES CORP COM	78,586	78,586
RH $267.19 RH COM	77,242	77,242
WTS $146.23 WATTS WATER TECHNOLOGIES INC CL A	75,002	75,002
CWK $10.80 CUSHMAN WAKEFIELD PLC	41,526	41,526
CRK $13.71 COMSTOCK RES INC COM	25,709	25,709

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MERCER PIP IV	FMV	42,923,235	42,923,235
MERCER PIP VI	FMV	32,182,262	32,182,262
MERCER PIP V	FMV	25,242,868	25,242,868
VIKING GLOBAL EQUITIES	FMV	13,792,133	13,792,133
JPMORGAN CORE BOND TRUST	FMV	12,636,241	12,636,241
ELLIOTT INTERNATIONAL LTD	FMV	12,462,658	12,462,658
MERCER GLOBAL OPPORTUNITIES	FMV	9,359,667	9,359,667
PARK STREET PRIVATE EQUITY XI	FMV	8,693,755	8,693,755
DIAMETER OFFSHORE	FMV	7,930,001	7,930,001
ACADIAN INTERNATIONAL SMALL CAP	FMV	7,848,609	7,848,609
WELLINGTON ENDURING ASSETS CTF	FMV	7,551,937	7,551,937
DAVIDSON KEMPNER	FMV	5,172,032	5,172,032
ATALAN OFFSHORE FUND LTD	FMV	4,964,948	4,964,948
PORTFOLIO ADVISORS VIII	FMV	4,546,270	4,546,270
NB CROSSROADS XX	FMV	3,332,142	3,332,142
NB CROSSROADS 24	FMV	3,317,133	3,317,133
1798 ADAPT FUND LTD.	FMV	1,958,440	1,958,440
UNSETTLED - MERCER GLOBAL OPPORTUNITIES	FMV	1,858,341	1,858,341
PARK STREET NATURAL RESOURCES V	FMV	1,814,628	1,814,628
MONTAUK TRIGUARD VI	FMV	1,449,478	1,449,478
NORTHGATE IV	FMV	1,362,985	1,362,985
Q-BLK REAL ASSETS	FMV	1,211,183	1,211,183
COMMONFUND INTERNATIONAL PRIVATE EQUITY	FMV	812,657	812,657
ANCHORAGE CAPITAL PARTNERS OFFSHORE	FMV	711,142	711,142
PARK STREET PRIVATE EQUITY VIII	FMV	654,337	654,337
PORTFOLIO ADVISORS VI	FMV	406,929	406,929
PORTFOLIO ADVISORS V	FMV	377,745	377,745
GOLDMAN SACHS VINTAGE IV	FMV	246,251	246,251
EUROPEAN STRATEGIC PARTNERS	FMV	240,102	240,102
NEWLIN ENERGY FUND II	FMV	234,689	234,689
PORTFOLIO ADVISORS IV	FMV	209,951	209,951
METROPOLITAN REAL ESTATE VI	FMV	209,051	209,051
PARK STREET NATURAL RESOURCES III	FMV	195,046	195,046
UNSETTLED - PARK STREET XI	FMV	175,000	175,000
CROWN GLOBAL SECONDARIES	FMV	129,548	129,548
PORTFOLIO ADVISORS III	FMV	119,269	119,269
VALINOR CAPITAL PARTNERS OFFSHORE	FMV	113,541	113,541
UNSETTLED - CROWN GLOBAL	FMV	36,000	36,000
SHEPHERD	FMV	33,309	33,309
NEWLIN ENERGY FUND	FMV	26,942	26,942
UNSETTLED - ANCHORAGE CAPITAL	FMV	13,746	13,746

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	44,387	0		44,387

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEFERRED BOND ISSUANCE COSTS	138,207	153,893	153,893
ARTWORK, NET	8,265,898	7,028,608	7,028,608
INVESTMENT - WHOLLY OWNED SUBS	19,151,714	17,451,965	17,451,965
NOTES REC FROM AFFILIATE	19,800,925	18,897,702	18,897,702
INTEREST REC FROM AFFILIATE	3,668,880	3,673,033	3,673,033
INVESTMENTS IN AFFILIATES	2,359,775	2,038,040	2,038,040
US BANK DERIVATIVE SWAP	255,191	185,877	185,877
INTEREST RECEIVABLE - OTHER	458,992	450,284	450,284
RIGHT OF USE ASSET	1,230,346	1,038,144	1,038,144
OTHER ASSETS	103,576	118,288	118,288

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Amount
LOSS ON SWAP	69,314
EQUITY LOSS IN AFFILIATE	1,221,490

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REPAIRS AND MAINTENANCE	64,835	0		64,835
DUES AND SUBSCRIPTIONS	19,518	0		19,518
BANK CHARGES	1,029	0		1,029
PAYROLL PROCESSING FEE	3,272	0		3,272
MISCELLANEOUS EXPENSE	3,090	0		3,090
BOND FINANCING COSTS	14,314	0		14,314
OFFICE EQUIPMENT	10,409	0		10,409
OFFICE SUPPLIES	8,465	0		8,465
DOVER - MISCELLANEOUS EXPENSE	3,079	0		3,079
MAC - PROPERTY TAXES	122,327	0		122,327
MAC - NON-OPERATING EXPENSES	350,680	74,176		276,503
RV - MISCELLANEOUS EXPENSE	1,459	1,459		0

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP INCOME - CAPITAL GAIN		3,260,066	0
PARTNERSHIP INCOME - ORDINARY		-234,946	0
PARTNERSHIP INCOME	0	-210,296	0
HEDGE FUNDS - CAPITAL GAINS	0	2,698,829	0
HOTEL FEES & TAX	238,092		238,092
FIELD HOUSE - PROGRAM REVENUE	262,303		262,303
PARTNERSHIP INCOME	4,895,023		4,895,023

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Amount
UNREALIZED GAIN (LOSS)	33,755,240

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Description	Beginning of Year - Book Value	End of Year - Book Value
LEASE LIABILITY	1,242,866	1,059,262

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	2,131,393	2,043,031		0
OTHER PROFESSIONAL FEES	17,154	0		17,154
CONSULTANT FEES	596	0		596

TY 2023 IRS 990 e-File Render

Name: IOWA WEST FOUNDATION

EIN: 42-1391990

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES PAID	1,025,830	0		0