** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**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.

OMB No. 1545-0047

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number Address INCOURAGE COMMUNITY FOUNDATION, INC. Name change Doing business as 39-1772651 Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 478 E. GRAND AVENUE 200 715-423-3863 6,857,569. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amend WISCONSIN RAPIDS, WI H(a) Is this a group return Applica-F Name and address of principal officer: BETSY WOOD for subordinates? ____ Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes L Tax-exempt status: X 501(c)(3) 527 (insert no.) 4947(a)(1) or If "No." attach a list. See instructions WWW.INCOURAGECF.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Trust Other Association L Year of formation: 1993 M State of legal domicile: WI Part I Summary Briefly describe the organization's mission or most significant activities; GUIDED BY VALUES OF EQUITY OPPORTUNITY, SHARED STEWARDSHIP, AND SOCIAL JUSTICE, INCOURAGE 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) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 75 6 3,208. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 1,802. b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 406,454. 8 Contributions and grants (Part VIII, line 1h) 3,696,398 300. 9 Program service revenue (Part VIII, line 2g) 900.2,011,436. 964,110. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 201. 1.101. 5,708,935. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 371,965. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 919,644. 914,409. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 239,976. 225,652. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 271,098. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 322,470. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,482,090. 1,411,159. 4,226,845. -39,194. 19 Revenue less expenses. Subtract line 18 from line 12 End of Year **Beginning of Current Year** 58 33,841,237. 28,763,253. 20 Total assets (Part X, line 16) 900,944. 1,641,534. 21 Total liabilities (Part X. line 26) 27,121,719. 31,940,293. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infermation of which preparer has any knowledge. Signature of officer Date Sign BETSY WOOD, MANAGING DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature TERRI REXRODE CPA MST TERRI REXRODE CPA, M11/13/23 ₱00096513 Paid self-employed WIPFLI LLP Firm's EIN 39-0758449 Preparer Firm's name Firm's address PO BOX 12237 Use Only GREEN BAY, WI 54307-2237 Phone no. 715-845-3111 May the IRS discuss this return with the preparer shown above? See instructions X Yes No

Form	1990 (2022) INCOURAGE COMMUNITY FOUNDATION, INC. 39-1//2651 Page 2
Par	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	FOUNDED AS A TRADITIONAL COMMUNITY FOUNDATION IN 1993, INCOURAGE HAS
	EVOLVED INTO AN INNOVATIVE NONPROFIT, DEDICATED TO, AND LED BY THE
	PEOPLE OF CENTRAL WISCONSIN. OVER ALMOST THREE DECADES, INCOURAGE HAS
	ADAPTED ITS WORK TO MEET THE COMPLEX NEEDS OF A REGION RECOVERING FROM
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$997,540 • including grants of \$864,409 •) (Revenue \$\$
	STRATEGIC PHILANTHROPY: INCOURAGE PROMOTES COLLECTIVE AND STRATEGIC
	PHILANTHROPY PRINCIPALLY IN THE SOUTH WOOD COUNTY AREA IN CENTRAL
	WISCONSIN. THIS RURAL AREA INCLUDES TEN MUNICIPALITIES LOCATED IN PARTS
	OF WOOD AND ADAMS COUNTIES, WITH A COMBINED POPULATION OF ABOUT 45,000.
	IN 2022, 210 GRANTS WERE APPROVED (EXCLUDING AGENCY GRANTS SUBJECT TO
	FAS 136) BENEFITING 86 TAX-EXEMPT ORGANIZATIONS. ALSO IN 2022, 176
	SCHOLARSHIPS WERE AWARDED FOR CONTINUED EDUCATION, TOTALING \$183,750
	AND BENEFITING 112 RECIPIENTS. SINCE 2017, MOST OF INCOURAGE'S
	SCHOLARSHIP AWARDS, RATHER THAN BEING ADMINISTERED AND PAID INTERNALLY
	BY INCOURAGE, ARE INSTEAD ADMINISTERED THROUGH INTERNATIONAL
	SCHOLARSHIP AND TUITION SERVICES (ISTS), A THIRD-PARTY SCHOLARSHIP
	ADMINISTRATOR. AS A RESULT, OF THE 2022 SCHOLARSHIPS, \$180,250 IS
4b	(Code:) (Expenses \$128,989. including grants of \$50,000.) (Revenue \$0.
	ALIGNMENT OF COMMUNITY CAPITALS: RECOGNIZING THAT GRANTS ALONE CANNOT SUPPORT THE NEEDS OF AN INNOVATIVE, EMERGING ECONOMY, INCOURAGE HAS
	COMMITTED TO ALIGN AND LEVERAGE ALL OF ITS CAPITALS, INCLUDING MORAL,
	HUMAN, SOCIAL, INTELLECTUAL, REPUTATIONAL, NATURAL, AND FINANCIAL, TO
	ADVANCE ITS MISSION. INCOURAGE OPERATES WITH A STRATEGY THAT EMBRACES
	INTENTIONAL FURTHER DEVELOPMENT AND DEPLOYMENT OF VALUES-ALIGNED,
	PLACE-BASED INVESTMENTS OF ITS FINANCIAL ASSETS, SOMETIMES REFERRED TO
	AS MISSION, IMPACT, OR COMMUNITY INVESTING. CURRENT MISSION ALIGNED
	INVESTMENTS INCLUDE INSURED DEPOSITS IN LOCAL BANKS AND CREDIT UNIONS,
	AND FIXED INCOME INVESTMENTS IN REGIONAL HIGH-PERFORMING COMMUNITY
	DEVELOPMENT FINANCIAL INSTITUTIONS (CDFI'S) THAT PROVIDE FINANCING TO
	REGIONAL BUSINESSES, HEALTH AND HUMAN SERVICES ORGANIZATIONS, AND
4c	(Code:) (Expenses \$ 71 , 914 • including grants of \$ 0 •) (Revenue \$ 300 •
	COMMUNITY ENGAGEMENT AND LEADERSHIP: INCOURAGE IS KNOWN NATIONALLY FOR
	ENCOURAGING, ORGANIZING, DEVELOPING, AND LEADING PROGRAMS AND COMMUNITY
	INITIATIVES THAT LEVERAGE RESOURCES, BUILD SELF-CONFIDENCE AND A SENSE
	OF AGENCY AMONG RESIDENTS, AND AIM TO REBUILD AND DIVERSIFY OUR LOCAL
	ECONOMY. INCOURAGE SUPPORTS BUILDING SOCIAL CAPITAL AND POSITIVE
	COMMUNITY CHANGE BY PROMOTING RESIDENT ENGAGEMENT, ADAPTIVE LEADERSHIP
	SKILLS, RELATIONSHIP BUILDING, COLLABORATION, CONVENING, ADVOCACY,
	PROACTIVE AND UNBIASED RESEARCH, CAPACITY BUILDING, A SHARED LEARNING
	ENVIRONMENT, AND THE EFFECTIVE EXCHANGE OF RELEVANT INFORMATION IN THE
	PROCESS. IT HAS A HISTORY OF JOINING WITH LOCAL, REGIONAL, STATE AND
	NATIONAL FUNDERS AND PARTNERS, IN BOTH THE PUBLIC AND PRIVATE SECTORS,
	WHO ARE COMMITTED TO PRUDENT AND TRANSPARENT EFFORTS TO TAKE EXISTING
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,198,443.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total		7.7	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			.,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		х
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b	Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		Λ	х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a		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			
		14b		х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	145		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			 -
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

Pa	rt IV 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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
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? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		7.7	
	Part V, line 1	34	X	_
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		v	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_V
0-	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
	NOTE: ALL OLD 220 HEIS ALE LEGULEG TO COLDICELE SCHEUUE O		42	

Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response or note to any line in this Part V								
					Yes	No			
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	11						
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?			10					

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Form 990 (2022) INCOURAGE COMMUNITY FOUNDATION, INC.

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 '	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За	X	
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	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
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 Advanced in the Financi	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
	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	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).			37	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			X	
b			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required	1_		. v
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	٠,		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7e 7f		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra				<u> </u>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Fo If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		/ 11		
Ü		by the	8		х
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the agreement in a constitution made and to the distribution and according 40000		9a		х
b			9b		Х
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	4		
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		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	L I			
	organization is licensed to issue qualified health plans	13b	_		
	Enter the amount of reserves on hand	13c			v
			14a	1	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b	1	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		4-		X
	excess parachute payment(s) during the year?		15		_
16	If "Yes," see the instructions and file Form 4720, Schedule N.	incomo?	46		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O.	IIICOITIE!	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.	tivities			
.,	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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INCOURAGE COMMUNITY FOUNDATION, INC. Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

						X
Sec	tion A. Governing Body and Management					
			1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4	<u>!</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	4	<u>.</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other			
	officer, director, trustee, or key employee?			2		<u> X</u>
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		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	one or			
	more members of the governing body?			7a		<u> X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,			
	· · · · · · · · · · · · · · · · · · ·			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the form?	11a	X	
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	X	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $If "Y$,				
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva		dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	· ·			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
<u> </u>	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed WI	1.6	 / =			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	-ı (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request X Other (explain					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	ntlict c	if interest policy, an	d finand	cial	
	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 boo	ks and	records			
	DAWN NEUMAN - 715-423-3863 478 F. GRAND AVE. SILTTE 200. WISCONSIN RAPIDS. WI.	449	1			

Form **990** (2022)

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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(do box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) BETSY WOOD	32.00	-		,,				60.050		12 400
MANAGING DIRECTOR	0.00			Х				69,850.	0.	13,482.
(2) DAWN NEUMAN CHIEF FINANCIAL OFFICER	30.00			х				49,367.	0.	22,540.
(3) KRISTOPHER GASCH	2.00								•	
DIRECTOR/CHAIR	2.00	х		x				0.	0.	0.
(4) DALE BIKOWSKI	1.00							-	-	
DIRECTOR/TREASURER	1.00	Х		х				0.	0.	0.
(5) DONNA ANDERSON	1.00									
DIRECTOR/SECRETARY	0.00	Х		Х				0.	0.	0.
(6) KRISTIE RAUTER-EGGE	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
	•	•	_	_			•			

Form 990 (2022)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hi	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do		Posi		າ than ເ	one	Reportable	Reportable		l	stimate	
	hours per week					is both or/trus		compensation	compensatio from related		an	nount (of
	(list any	tor						from the	organization		com	other pensa	tion
	hours for	r director				pg		organization	(W-2/1099-MIS		ı	om the	
	related	stee o	rustee			ensat		(W-2/1099-MISC/	1099-NEC)		,	anizati	
	organizations below	ıal trus	onal tı		oloyee	ee comb		1099-NEC)			l	d relate	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga 	anizatio	ons
	,	드	드	Ó	3	王壱	Œ						
		•											
						<u> </u>							
						<u> </u>							
						\vdash							
						\vdash							
1b Subtotal								119,217.		0.	3	6,02	22.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								119,217.		0.	3	6,02	<u>22.</u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	•			_
compensation from the organization												1	0
												Yes	No
3 Did the organization list any former officer,			-	-	-		_		-				v
line 1a? If "Yes," complete Schedule J for s								ar componentian from t			3		_X_
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	•							•	•		4		Х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	•				•			· ·			5		Х
Section B. Independent Contractors	, Joseph Confedent												
Complete this table for your five highest co	mpensated inc	lepe	nder	nt cc	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensa	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)		_	(0		
Name and business	address	NC	ONE	5				Description of s	ervices		ompe	nsatior	n
							\dashv						
							\dashv						
							\dashv						
2 Total number of independent contractors (ii	acluding but n	at lin	nitor	1 +0 +	thos	o lic	+04	abovo) who received me	are then				

Form **990** (2022)

\$100,000 of compensation from the organization

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
တ္ထ	1	<u> </u>	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	•		Membership dues	1b					
جَ ق			Fundraising events	1c					
ffs,			Related organizations	1d					
ig ig									
Sir			Government grants (contributions)	1e					
utic er		T	All other contributions, gifts, grants, and	I I	406,454.				
έş			similar amounts not included above	1f	61,488.				
		_	Noncash contributions included in lines 1a-1f	1g \$	01,400.	406 454			
O a		n	Total. Add lines 1a-1f		Business Code	406,454.			
			DDOGDAM AND EAGTI THATTON GE	DUTABA	900099	300.	300		
<u>ic</u>	_		PROGRAM AND FACILITATION SE	RVICES	900099	300.	300.		
er re		b							
n S		С							
ra Sev		d							
Program Service Revenue		е							
Δ.			All other program service revenue						
		g	Total. Add lines 2a-2f			300.			
	3		Investment income (including divide	nds, intere	st, and				
			other similar amounts)			556,959.		3,170.	553,789.
	4		Income from investment of tax-exem	npt bond pi	roceeds				
	5		Royalties						
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) S	ecurities	(ii) Other				
			assets other than inventory 7a 5,	892,755.					
		b	Less: cost or other basis						
e			and sales expenses 7b 5,	485,604.					
her Revenue		С		407,151.					
Re			Net gain or (loss)			407,151.		38.	407,113.
ē			Gross income from fundraising events (r						
₽			including \$						
			contributions reported on line 1c). S	ee					
			Part IV, line 18	8a					
		b	Less: direct expenses						
			Net income or (loss) from fundraising						
			Gross income from gaming activities						
			Part IV, line 19						
		b	Less: direct expenses						
			Net income or (loss) from gaming ac						
			Gross sales of inventory, less return						
			and allowances						
		b	Less: cost of goods sold						
			Net income or (loss) from sales of in						
\neg				··· j ···	Business Code				
sno	11	а							
Miscellaneous Revenue	••	b		_					
əllə ver		c							
Sce			All other revenue		900099	1,101.			1,101.
Σ			Total. Add lines 11a-11d			1,101.			,===
	12		Total revenue. See instructions			1,371,965.	300.	3,208.	962,003.

Check if Schedule O contains a response or note to any line in this Part IX	Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	ar organizations must con	nnlete column (Δ)								
Do not include amounts reported on lines 6b, Total expenses Program service expenses Management and general expenses Program service expenses Management and general expenses Program service Prog	<u> Jecii</u>												
Total suppresses		• 1		(B)	(C)	(D)							
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 910,909. 910,909. 3,500. 3,		' '	Total expenses		Management and								
and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign operaments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation or included above to disqualified persons (as defined under section 4958(I)(1)) and persons described in section 4958(I)(1)) and persons described in section 4958(I)(1)) and persons described in section 4958(I)(1) and approximate and contributions (include section 40(I)) and 40(I)) employer contributions 1,863. 1,696. 98. 69 Profession plan accruals and contributions (include section 40(I)) and 40(I)) employer contributions 1,870. 1,493. 230. 147 Payroll taxes 1,870. 1,493. 230. 147 Payroll taxes 1,870. 1,493. 2,367. 998 These for services (nonemployees): a Management b Legal 6,261. 4,193. 1,959. 109 c Accounting 13,000. 13,000. 13,000. d Lobbying 13,000. 13,000. 13,000. d Lobbying 17,902. 117,902. 117,902. Other, (Illine 11g amount exceeds 10% of line 25, column (A), amount, list lime 11g expenses on Sch 0.) 348. 268. 57. 23 348. 268. 57. 23 3 Giffice expenses 9,096. 5,298. 1,660. 2,138 Hormation technology 48,124. 36,960. 7,917. 3,247 For position of travel or entertainment expenses for any federal, state, or local public officials 100. 100. 60. 40 Interest filliates 94 and mortization 100. 100. 60. 40 Uniter represes, lienize expenses on line 24e it line 24e amount exceeds 10% of line 25, column (A), 669. 991. 3,590. 88				СХРСПЗСЗ	general expenses	Схропосо							
2 Grants and other assistance to domestic individuals. See Part IV, line 22 (and individuals. See Part IV, line 24) (and individuals. See Part IV, line 25) (and individuals. See Part IV, line 26) (and individuals. See Part IV, line 27) (and individuals. See Part IV, line 27) (and individuals. See Part IV, line 27) (and individuals) (and individuals of individuals) (and individual above to disqualified persons (as defined under section 4958(c)(3)(8)) (and persons described in section 4958(c)(3)(8)) (and individual and individu	•	-	910 909.	910 909									
individuals. See Part IV, line 22 3,500. 3,500. 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1) and persons described in	2		310/3031	310/3031									
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(B) 7 Other salaries and vages 8 Pension plan accruals and contributions (include section 4968(c)(3)(B) 9 Other employee benefits 1 1,870 1,493 230 147 10 Payroll taxes 11,696 98. 69 911 Fees for services (nonemployees): a Management b Legal 6,261 4,193 1,959 109 c Accounting 1 23,000 133,000 133,000 10 130,000 117,902	2		3 500.	3 500.									
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees trustees, and key employees and persons described in section 4958(c)(1)) and persons described in section 4958(c)(3)(8) 7 Other salaries and wages 57,368. 50,040. 4,541. 2,787 8 Pension plan accruals and contributions (include section 401k) and 401k) employer contributions (section 401k) and 401k) employer contributions (section 401k) and 401k) employer contributions 1,870. 1,493. 230. 147 10 Payroll taxes 14,657. 11,292. 2,367. 998 11 Fees for services (nonemployees): 1 Advantagement 6,261. 4,193. 1,959. 109 2 Accounting 13,000. 13,000. 3 Lobbying 13,000. 13,000. 14,7902. 9 Other (If line 11) amount exceeds 10% of line 25, column (A), amount, list line 110 expenses on Sch 0.) 17,963. 17,137. 583. 243 13 Office expenses 9,096. 5,298. 1,660. 2,138 14 Information technology 48,124. 36,960. 7,917. 3,247 15 Royalties 100. 100. 100. 100. 100. 100. 100. 100	2		373001	3,3001									
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7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1													
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Section 401(k) and 403(b) employer contributions)			2.,000	20,0200	-,	_,							
10 Payroll taxes	3		1.863.	1.696.	98.	69.							
10 Payroll taxes	9		1,870.	1,493.	230.	147.							
11 Fees for services (nonemployees): a Management			14,657.	11,292.		998.							
a Management b Legal 6, 261. 4, 193. 1, 959. 109 c Accounting 13,000. 133,000. d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees 117, 902. 117, 902. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 348. 268. 57. 23 13 Office expenses 9,096. 5,298. 1,660. 2,138 14 Information technology 48,124. 36,960. 7,917. 3,247 15 Royalties 16 Occupancy 10,162. 8,919. 877. 366 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21,819. 16,762. 3,567. 1,490 21 Insurance 4,669. 991. 3,590. 88			,	, -	,								
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C Accounting 13,000. 13,000.			6,261.	4,193.	1,959.	109.							
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 348. 268. 57. 23 13 Office expenses 9,096. 5,298. 1,660. 2,138 14 Information technology 48,124. 36,960. 7,917. 3,247 15 Royalties 10,162. 8,919. 877. 366 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 10 Interest 20 Insurance 4,669. 991. 3,590. 88 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25c. oclumn (A).													
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 348. 268. 57. 23 13 Office expenses 9,096. 5,298. 1,660. 2,138 14 Information technology 48,124. 36,960. 7,917. 3,247 15 Royalties 16 Occupancy 10,162. 8,919. 877. 366 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21,819. 16,762. 3,567. 1,490 23 Insurance 4,669. 991. 3,590. 88 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25c. olumn (A),													
Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12													
Other (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 17,963. 17,137. 583. 243	f	Investment management fees	117,902.		117,902.								
13 Office expenses	g												
13 Office expenses		column (A), amount, list line 11g expenses on Sch O.)	17,963.			243.							
14 Information technology 48,124. 36,960. 7,917. 3,247 15 Royalties 16 Occupancy 10,162. 8,919. 877. 366 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21,819. 16,762. 3,567. 1,490 23 Insurance 4,669. 991. 3,590. 88 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). 100.	12	Advertising and promotion											
15 Royalties 16 Occupancy 10,162. 8,919. 877. 366 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 20 Interest 21 Payments to affiliates 21 Naturance 21,819. 16,762. 3,567. 1,490 23 Insurance 4,669. 991. 3,590. 88 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), 88	13	Office expenses				2,138.							
16 Occupancy 10,162. 8,919. 877. 366 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 60. 40 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21,819. 16,762. 3,567. 1,490 23 Insurance 4,669. 991. 3,590. 88 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),	14	Information technology	48,124.	36,960.	7,917.	3,247.							
Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),	15	Royalties											
Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100.	16	Occupancy	10,162.	8,919.	877.	366.							
for any federal, state, or local public officials 19 Conferences, conventions, and meetings 100. 10	17												
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),	18	Payments of travel or entertainment expenses											
Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),			100			4.0							
Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),			100.	60.		40.							
Depreciation, depletion, and amortization 21,819. 16,762. 3,567. 1,490 23 Insurance 4,669. 991. 3,590. 88 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),													
Insurance 4,669. 991. 3,590. 88 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),			21 010	16 760	2 567	1 400							
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),						1,490.							
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),		***************************************	4,009.	991.	3,390.	00.							
line 24è amount exceeds 10% of line 25, column (A),	24												
amount, list line 24e expenses on Schedule U.)		line 24e amount exceeds 10% of line 25, column (A),											
TIND DDOODAN AGETYTETEG 10 142 10 142	_		18 1/3	18 1/13									
					1 025	54.							
c COMMUNICATIONS/SPONSORS 84. 84.					1,025								
d			<u> </u>	Ü 1.									
e All other expenses		All other expenses											
		•	1,411,159.	1,198,443.	189,352.	23,364.							
26 Joint costs. Complete this line only if the 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)		Check here if following SOP 98-2 (ASC 958-720)											

Form **990** (2022)

ı a	rt A	Balance Sheet					
		Check if Schedule O contains a response or no	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			40,071.	1	145,836.
	2	Savings and temporary cash investments			2,654,794.	2	2,029,713.
	3	Pledges and grants receivable, net			27,704.	3	11,368.
	4	Accounts receivable, net	6,417.	4	289.		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, sub-		· · · · · · · · · · · · · · · · · · ·			
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqua	lified pers				
		under section 4958(f)(1)), and persons describe		6			
S	7	Notes and loans receivable, net		Г		7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			22,506.	9	16,053.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	450,681.			
	b	Less: accumulated depreciation		418,748.	45,252.	10c	31,933.
	11	Investments - publicly traded securities		-	27,633,938.	11	23,133,049.
	12	Investments - other securities. See Part IV, line			208,250.	12	170,046.
	13	Investments - program-related. See Part IV, line		2,973,939.	13	3,010,404.	
	14	Intangible assets	5,014.	14	5,014.		
	15	Other assets. See Part IV, line 11	223,352.	15	209,548.		
	16	Total assets. Add lines 1 through 15 (must eq			33,841,237.	16	28,763,253.
	17	Accounts payable and accrued expenses	12,685.	17	13,801.		
	18	Grants payable	72,600.	18	82,923.		
	19	Deferred revenue	191,922.	19	191,922.		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete		21			
S	22	Loans and other payables to any current or for	mer office	er, director,			
Liabilities		trustee, key employee, creator or founder, sub-	stantial co	ontributor, or 35%			
abil		controlled entity or family member of any of the	ese perso	ns		22	
Ë	23	Secured mortgages and notes payable to unre	lated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	arties		24	
	25	Other liabilities (including federal income tax, p	ayables t	o related third			
		parties, and other liabilities not included on line	es 17-24).	Complete Part X			
		of Schedule D			1,623,737.	25	1,352,888.
	26	Total liabilities. Add lines 17 through 25			1,900,944.	26	1,641,534.
		Organizations that follow FASB ASC 958, ch	eck here	X			
Ses		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			31,620,927.	27	26,855,407.
Bal	28	Net assets with donor restrictions			319,366.	28	266,312.
pu		Organizations that do not follow FASB ASC	958, che	ck here			
Ī		and complete lines 29 through 33.					
SOF	29	Capital stock or trust principal, or current fund	s			29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated i	ncome, o	r other funds		31	
Net	32	Total net assets or fund balances			31,940,293.	32	27,121,719.
_	33				33,841,237.	33	28,763,253.

Pa	rt XI Reconciliation of Net Assets					<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XI					X
	oncok in ourcedule o dontains a response of fisce to any line in this rate XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	, 37:	1.9	65.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	41:	1,1	59.
3	Revenue less expenses. Subtract line 2 from line 1	3				94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	31			93.
5	Net unrealized gains (losses) on investments	5				70.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		5 (5,1	90.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	27	,12:	1,7	19.
Pa	rt XII Financial Statements and Reporting	•				
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

		INCO	URAGE COMM	UNITY FOUNDAT	rion,	INC.			9-1772651
Pa	art I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions	i.	
The	organ	ization is not a private found	lation because it is: (I	For lines 1 through 12, cl	neck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental un	it describe	ed in
		section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	ılly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from the	e general į	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8	X	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II.)				
9		An agricultural research org				ed in conju	unction with a l	and-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of t	he college	or
		university:							
10		An organization that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	o fees, and	d gross receipts from
		activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	support f	rom gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the orga	anization a	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)						
11		An organization organized a	and operated exclusi	ively to test for public saf	ety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	ry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2).	See section 5	09(a)(3). 🤇	Check the box on
		lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and	12g.	
á	a 🖳		anization operated, s	upervised, or controlled I	by its supp	oorted org	anization(s), typ	oically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	ctors or trustee	s of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.					
ŀ	.		anization supervised	or controlled in connect	ion with it	s supporte	ed organization	(s), by hav	/ing
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
(; L		grated. A supporting	g organization operated i	in connect	tion with, a	and functionally	/ integrate	ed with,
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.		
(k		y integrated. A supp	porting organization operation	ated in co	nnection v	vith its support	ed organiz	zation(s)
		that is not functionally int	tegrated. The organiz	cation generally must sati	isfy a distr	ibution red	quirement and	an attentiv	veness
	_	requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
•	• L_		anization received a v	written determination from	m the IRS	that it is a	Type I, Type II	, Type III	
		functionally integrated, or	r Type III non-functio	nally integrated supportir	ng organiz	ation.			
		er the number of supported o	•						
9		vide the following information i) Name of supported	n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of	monotony	(vi) Amount of other
	,	organization	(II) LIIV	(described on lines 1-10	in your governi	ing document?	support (see ins	•	support (see instructions)
_				above (see instructions))	Yes	No			
							+		
_							<u> </u>		
_									
	al								
Tot	al								I

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	440,297.	754,943.	324,649.	512,504.	383,548.	2415941.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	440,297.	754,943.	324,649.	512,504.	383,548.	2415941.
5							
	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)						413,272.
6	Public support. Subtract line 5 from line 4.						2002669.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	440,297.	754,943.	324,649.	512,504.	383,548.	2415941.
	Gross income from interest,	110/23/0	73173131	321/0130	312/3010	303/3101	21133111
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	630,710.	472 898	376 969	549 709	556,959.	2587245.
٥	Net income from unrelated business	030,710.	472,000	370,3036	343,703.	330,333.	2307243.
9							
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						5003186.
	Total support. Add lines 7 through 10					12	3,964.
	Gross receipts from related activities,	•					3,304.
13	First 5 years. If the Form 990 is for the	-		•			
80	organization, check this box and storetion C. Computation of Publi						
	•			- l (f\)		44	40.03 %
	Public support percentage for 2022 (I					14	40 50
	Public support percentage from 2021					15	
162	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies as a publicly supported organization						
t	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qualifies as a publicly supported organization						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			=	•	VI how the organiz	ation
	meets the facts-and-circumstances te	-		*	-		
k	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar		(Form 990) 2022

Schedule A (Form 990) 2022 INCOURAGE COMMUNITY FOUNDATION, INC. 39-1772651 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.)

Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	(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.") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to 						
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						
 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 						
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					1	
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						
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						
organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to						
 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 						
are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to						
iness under section 513 Tax revenues levied for the organization's benefit and either paid to						
Tax revenues levied for the organization's benefit and either paid to						
ization's benefit and either paid to						
· I						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
		1		I	1	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 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						
c 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 th	•		•		. , . ,	· —
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2022 (li	ne 8, column (f), c	livided by line 13,	column (f))		15	
16 Public support percentage from 2021					16	(
Section D. Computation of Inves	tment Income	e Percentage			, ,	
17 Investment income percentage for 20	22 (line 10c, colu	mn (f), divided by li	ine 13, column (f))		17	(
18 Investment income percentage from 2	2021 Schedule A,	Part III, line 17			18	(
19a 33 1/3% support tests - 2022. If the					33 1/3%, and line 17	' is not
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2021. If the						nd
line 18 is not more than 33 1/3%, chec						
	n did not check a					

232023 12-09-22

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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 **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
_		
3c		
_		
4a		
Al-		
4b		
4c		
70		
5a		
5b		
5c		
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9a		
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9b		
9с		
10a		
10b		
A /Farm	~ ^^^	2022

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Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
_	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	1		
	<i>y</i> 11 0 0		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	4		
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
Sec	tion 6. Type if Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
_	the supported organization(s).	1		
Sec	tion 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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction	(2)	
2	Activities Test. Answer lines 2a and 2b below.	non donor	Yes	No
a	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	20		
L	that these activities constituted substantially all of its activities. Did the activities described on line 2a above constitute activities that, but for the organization's involvement.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	~		
•	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

3b | 232025 12-09-22 | Schedule A (Form 990) 2022

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

За

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations mu	st complete s	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
_3	Other gross income (see instructions)	3			
_4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
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-function	ally integrate	d Type III supporting orga	nization (see	
	instructions).				

Schedule A (Form 990) 2022

Section E - Distribution Allocations (see instructions	s) (i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, li	ine 6		
2 Underdistributions, if any, for years prior to 2022	2 (reason-		
able cause required - explain in Part VI). See ins	structions.		
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instruction	ns)		
j Remainder. Subtract lines 3g, 3h, and 3i from lin	ne 3f.		
4 Distributions for 2022 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4			
5 Remaining underdistributions for years prior to 2	2022, if		
any. Subtract lines 3g and 4a from line 2. For re-	sult greater		
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract	t lines 3h		
and 4b from line 1. For result greater than zero,	explain in		
Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add I	ines 3j		
and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule of Contributors Attach to Form 990 or Form 990-PF.

INC.

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

INCOURAGE COMMUNITY FOUNDATION

OMB No. 1545-0047

Name of the organization

Employer identification number

39-1772651

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

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

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

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

Schedule B (Form 990) (2022)

Page 2

Name of organization Employer identification number

. .

INCOU	RAGE COMMUNITY FOUNDATION, INC.		39-1772651
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1		\$ 105,8	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
2		\$ 95,62	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
3_		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
4		\$35,40	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
5		\$31,73	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2**

Name of organization Employer identification number

INCOU	RAGE COMMUNITY FOUNDATION, INC.	3	9-1772651
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

INCOURAGE COMMUNITY FOUNDATION, INC.

39-1772651

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	VARIOUS PUBLICALLY TRADED SECURITIES, BONDS AND MUTUAL FUNDS		
		\$61,488.	04/13/22
(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
223453 11-15		\$	Schedule B (Form 990) (2022)

Name of organization **Employer identification number** INCOURAGE COMMUNITY FOUNDATION, INC. 39-1772651 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 info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of org			INDAMION INC		ployer identification number 39-1772651
Part I-A	Complete if the ord	GE COMMUNITY FOU anization is exempt und	der section 501(c)	or is a section 527 o	
1 Provide 2 Politica	e a description of the organiz	ation's direct and indirect politi	cal campaign activities i	n Part IV.	
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(3).	
2 Enter t3 If the o4a Was ab If "Yes	he amount of any excise tax rganization incurred a sectio correction made?	incurred by the organization un incurred by organization manag n 4955 tax, did it file Form 4720	gers under section 4955) for this year?		\$ Yes
Part I-C	·	anization is exempt und			
2 Enter t exemp	he amount of the filing organ	l by the filing organization for se ization's funds contributed to o	ther organizations for se	ection 527	\$ \$
		. Add lines 1 and 2. Enter here			Φ
		1120-POL for this year?			
5 Enter t made p contrib	he names, addresses and en payments. For each organiza utions received that were pro	inployer identification number (E tion listed, enter the amount pa comptly and directly delivered to additional space is needed, pro	IN) of all section 527 po id from the filing organiz a separate political orga	litical organizations to whic cation's funds. Also enter th anization, such as a separa	ch the filing organization ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	contributions received and
_					

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

Schedule C (Form 990) 2022

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232041 11-08-22

Sche	edule C (Form 990) 2022	TNCOURAGE C	OMMUNITY FO	INDATTON T	JC. 39-1	772651 Page 2
	rt II-A Complete if the org section 501(h)).	anization is exer	npt under section	501(c)(3) and file		
	expenses, and shar	re of excess lobbying e	liated group (and list in expenditures).		group member's name	e, address, EIN,
	Limi	ts on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
b c d e	Total lobbying expenditures to influction Total lobbying expenditures to influction Total lobbying expenditures (add list of the exempt purpose expenditure Lobbying nontaxable amount. Enter Lobbying nontaxable	uence a legislative book nes 1a and 1b) es s (add lines 1c and 1d er the amount from the r (b) is: The lob 20% of 0,000 \$100,000	dy (direct lobbying) be following table in both bying nontaxable amount on line 1e. 20 plus 15% of the excess polyposes of the excess polyposes 5% of the excess polyposes polypose	ount is: ess over \$500,000. ess over \$1,000,000.	0. 0. 1,411,159. 1,411,159. 216,116.	
h	Grassroots nontaxable amount (en Subtract line 1g from line 1a. If zer Subtract line 1f from line 1c. If zero If there is an amount other than ze reporting section 4911 tax for this (Some organizations the	o or less, enter -0- o or less, enter -0- ro on either line 1h or year? 4-Year Ave hat made a section 5	eraging Period Under	section 501(h)		Yes No
		Lobbying Expe	nditures During 4-Yea	r Averaging Period		
	Calendar year	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	298,343.	215,226.	223,173.	216,116.	952,858.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,429,287.
c Total lobbying expenditures	61,500.	15,400.	15,625.		92,525.
d Grassroots nontaxable amount	74,586.	53,807.	55,793.	54,029.	238,215.
e Grassroots ceiling amount (150% of line 2d, column (e))					357,323.
f Grassroots lobbying expenditures					Ja O (Farry 200) 2000

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 INCOURAGE COMMUNITY FOUNDATION, INC. 39-17726 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	· · · · · · · · · · · · · · · · · · ·		,,	o)
or the i	lobbying activity.	Yes	No	Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or				
le	local legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a ∖	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f (Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>	
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		05.00	otion	
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	11 30 1 (6)(3)	, or se	Stion	
art					
art	00.(0)(0).			Yes	N
	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	N
1 V				Yes	N
1 V 2 [Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5)	2 3), or se	ction	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

Employer identification number 39-1772651

Total number at end of year	Pai	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lir		s or Accounts. Complete if the
Total number at end of year		organization answered Tes On Torm 990,1 art 14, iii		(b) Funds and other accounts
2 Aggregate value of contributions to (during year) 3 Aggregate value of prants from (during year) 1 35, 343. 170,002. 4 Aggregate value at end of year 1,199,516. 1,347,557. 5 Did the organization informal clonors and donor advisors in writing that the assets held in donor advisor during are the organization informal clonors and donor advisors in writing that the assets held in donor advised funds are the organization informal grantees, denors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of open space 2 Complete inse 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 3 Total number of conservation easements and advisor of conservation easements included in (a) 2e 2 do 100 Number of conservation easements included in (a) 2e 2 do 100 Number of conservation easements modeled in (c) acquired after July 25,2006, and not on a historic structure included in (a) 2e 2 do 100 Number of conservation easements modeled in (c) acquired after July 25,2006, and not on a historic structure included in (a) 2e 2 do 100 Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure included in (a) 2e 2 do 100 Number of conservation easements included in (a) 3e 2e 3d Number of states where property subject to conservation easement in sociated on the Number of states where property subject to conservation easements in the requirement of expenses incurred in monitoring, inspectin	1	Total number at end of year	. ,	` '
3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 1, 199, 516. 1, 347, 557. 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? All the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization check all that apply. Preservation of land for public use (for example, recreation or education) Preservation of a natural habitat Preservation of natural habitat Preservation of a natural habitat Preservation of a natural habitat Preservation of conservation easements 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements 5 Total acreage restricted by conservation easements Complete lines 2a through 2d if the organization in the form of a conservation easement on the last of conservation easements on a conflict in the form of a conservation easement on the last of the tax year. a Total number of conservation easements Conservation easements on easements 2 Description of conservation easements on a conflict in the form of a conservation easement on the last of the tax year. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year were reported on line 2(d) above satisfy the requirements of section 170(h)(4)(15)(i) and except the regularization have a written policy regarding the periodic monitoring, inspection, han	_			
4 Aggregate value at end of year	_		135,343.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? No			1 1 1 1 1 1	
are the organization's property, subject to the organization's exclusive legal control?				•
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impormissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(9) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of parts Preservation of parts Preservation of open space Preservation of parts Preservation of parts Preservation of open space Preservation open space Preservation of open space Preservation of open space Preservation open space Preservation open space Preservation open space Preserva		-	-	
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organization Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and bal		day of the tax year.		Held at the End of the Tax Year
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historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Year	С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	d			
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and section 170(h)(4)(B)(ii)?	•		aming of violations, and officing conserve	ation casemonia daring the year
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2022

31,933. Schedule D (Form 990) 2022

31,933

e Other

450,681.

b Buildingsc Leasehold improvements

d Equipment

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

418,748.

Part VII	Investments - Other Securities.

Part VIII investments - Other Securities.						
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.						
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1) Financial derivatives						
(2) Closely held equity interests						
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)						
Part VIII Investments - Program Related.						
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1) LOANS TO COMMUNITY						
(2) PROPERTY, INC. FOR						

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) LOANS TO COMMUNITY		
(2) PROPERTY, INC. FOR		
(3) TRIBUNE PROPERTY		
(4) RECONSTRUCTION	2,403,570.	COST
(5) AFFORDABLE HOUSING &		
(6) SMALL BUSINESS LOAN FUND	253,664.	COST
(7) SMALL BUSINESS &		
(8) MICROENTERPRISE REVOLVING		
(9) LOAN FUNDS	353,170.	COST
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	3,010,404.	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
	

Total. (Column (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 IV, line 11e or 11f. See Form 990, Part X, line 25.

	•
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS HELD FOR OTHER AGENCIES	1,332,348.
(3) CHARITABLE GIFT ANNUITIES	1,332,348.
(4)	
(5)	
(6)	
(8)	
(9)	
Total (Column (b) must equal Form 900, Part V, col. (P) line 25.)	1.352.888.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

Schedule D		2022
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Sche	dule D (Form 990) 2022 INCOURAGE COMMUNITY FOUNDATI	ON,	INC.	39-	1772651	Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Statements	s Wit	h Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	-3,553	,365.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-4,835,570.			
b	Donated services and use of facilities	2b				
С		2c				
d		2d	-47,470.			
е	Add lines 2a through 2d			2e	-4,883	,040.
3	Subtract line 2e from line 1			3	1,329	,675.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	42,290.			
С	Add lines 4a and 4b			4c		<u>,290</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,371	,965.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemen	ts W	ith Expenses per F	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	1,296	<u>,050.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a		_		
b	Prior year adjustments	2b		_		
С	Other losses	2c		_		
d	Other (Describe in Part XIII.)	2d	114,734.			
е	Add lines 2a through 2d			2e		<u>,734</u> .
3	Subtract line 2e from line 1			3	1,181	,316.

Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) | Part XIII | Supplemental Information.

b Other (Describe in Part XIII.)

c Add lines 4a and 4b

Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b

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.

PART X, LINE 2:

THE ORGANIZATION IS REQUIRED TO ASSESS WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION OF THE TECHNICAL MERITS OF THE POSITION, ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION. IF THE TAX POSITION DOES NOT MEET THE MORE-LIKELY-THAN-NOT-RECOGNITION THRESHOLD, THE BENEFIT OF THAT POSITION IS NOT RECOGNIZED IN THE FINANCIAL STATEMENTS. THE ORGANIZATION HAS DETERMINED THERE ARE NO AMOUNTS TO RECORD AS ASSETS OR LIABILITIES RELATED TO UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE RELATED TO SUPPORTING ORGANIZATION

70,432.

229,843.

Schedule D (Form 990) 2022 INCOURAGE COMMUNITY FOUNDATION, INC. Part XIII Supplemental Information (continued)	39-1772651 Page 5
INVESTMENT MANAGEMENT FEES NETTED AGAINST REALIZED AND	
UNREALIZED GAIN(LOSS)	-117,902.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-47,470.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
INTEREST INCOME FROM SUPPORTING ORGANIZATION	41,340.
UBIT REFUND	950.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	42,290.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EXPENSES RELATED TO SUPPORTING ORGANIZATION	114,734.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	_
RENT PAID TO SUPPORTING ORGANIZATION	4,800.
GRANTS PAID TO SUPPORTING ORGANIZATION	50,000.
PREVIOUS YEARS GRANT EXPENSE CANCELLATIONS AND/OR REFUNDS	56,190.
UBIT REFUND NETTED ON FINANCIALS	951.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	111,941.
PART XI AND XII, LINE 1	_
THE FINANCIAL STATEMENTS ARE CONSOLIDATED AND ALL AFFILIATE	REVENUE AND
EXPENSES MUST BE ELIMINATED IN ORDER TO RECONCILE TO THE TAX	RETURN.
	_

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization INCOURAGE	COMMUNIT	Y FOUNDATIO	N, INC.				Employer identification number 39-1772651
Part I General Information on Grants a			•				
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to I recipient that received more than \$\frac{1}{2}\$	_				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AGING AND DISABILITY RESOURCE CENTER OF CENTRAL WISCONSIN - 220 3RD AVENUE SOUTH SUITE 1 -							GENERAL & PROGRAM RELATED
WISCONSIN RAPIDS, WI 54495	39-6005763	501(C)(3)	24,474.	0.			SUPPORT
ALEX C DOVE FOUNDATION, INC. 928 SUSSEX COURT NEKOOSA, WI 54457	83-2464031	501(C)(3)	7,396.	0.			GENERAL & PROGRAM RELATED SUPPORT
ASPIRUS RIVERVIEW FOUNDATION, INC. PO BOX 8080 WISCONSIN RAPIDS, WI 54495-8080	39-1509239	501(C)(3)	7,020.	0.			GENERAL & PROGRAM RELATED SUPPORT
ASSUMPTION CATHOLIC SCHOOLS 445 CHESTNUT STREET WISCONSIN RAPIDS, WI 54494	39-1951797	501(C)(3)	5,630.	0.			GENERAL & PROGRAM RELATED SUPPORT
ASSUMPTION FOUNDATION, INC. PO BOX 1041 WISCONSIN RAPIDS, WI 54495-1041	39-6124767	501(C)(3)	12,600.	0.			GENERAL & PROGRAM RELATED SUPPORT
ASSUMPTION HIGH SCHOOL 445 CHESTNUT ST WISCONSIN RAPIDS, WI 54494		501(C)(3)	67,248.	0.			GENERAL & PROGRAM RELATED SUPPORT
2 Enter total number of section 501(c)(3) and	•		e line 1 table				22.
3 Enter total number of other organizations	s listed in the line	1 table					1 .

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BADGERLAND YOUTH FOR CHRIST, INC.							
303 E 9TH ST							GENERAL & PROGRAM RELATED
FOND DU LAC, WI 54935	23-7391603	501(C)(3)	7,500.	0.			SUPPORT
BOY SCOUTS OF AMERICA SAMOSET COUNCIL - 3511 CAMP PHILLIPS ROAD	20 0012207	F01/G)/2)	14.470				GENERAL & PROGRAM RELATED
- WESTON, WI 54476 BOYS & GIRLS CLUB OF THE WISCONSIN	39-0813397	501(C)(3)	14,478.	0.			SUPPORT
RAPIDS AREA, INC PO BOX 1175, 501 W GRAND AVE - WISCONSIN	20 1745042	E01/G)/2)	00.001	0			GENERAL & PROGRAM RELATED
RAPIDS, WI 54495-1175	39-1745942	501(C)(3)	98,801.	0.			SUPPORT
CAMP LUTHER, INC. (LUTHERAN CHURCH MISSOURI SYNOD GROUP 1709) - 1889 KOUBENEC ROAD - THREE LAKES, WI 54562	46-1484669	501(C)(3)	10,000.	0.			GENERAL & PROGRAM RELATED
CENTRAL WISCONSIN CULTURAL CENTER,							
INC 2651 8TH STREET SOUTH -							GENERAL & PROGRAM RELATED
WISCONSIN RAPIDS, WI 54494	39-1869751	501(C)(3)	15,378.	0.			SUPPORT
COMMUNITY PROPERTY, INC.							
478 E GRAND AVE., SUITE 200							GENERAL & PROGRAM RELATED
WISCONSIN RAPIDS, WI 54494	26-0425048	501(C)(3)	50,000.	0.			SUPPORT
FEEDING OUR COMMUNITIES WITH							
UNITED SERVICES, INC. (FOCUS) -							CHARLE & DROGEN PHILADER
2321 WEST GRAND AVE - WISCONSIN RAPIDS, WI 54495	47-5327773	501/C\/3\	11 510	0.			GENERAL & PROGRAM RELATED SUPPORT
GIRL SCOUTS OF THE NORTHWESTERN	47-3327773	501(0)(3)	11,519.	0.			BUFFORI
GREAT LAKES, INC 3511 CAMP							
PHILLIPS ROAD - SCHOFILED, WI							GENERAL & PROGRAM RELATED
54476	39-1016314	501(C)(3)	5,275.	0.			SUPPORT
INTERNATIONAL SCHOLARSHIP AND			, -	-			THIRD PARTY SCHOLARSHIP
TUITION SERVICES - 1321							ADMINISTRATOR FOR
MURFREESBORO PIKE, SUITE 800 -							SUPPORTING SELECTION,
NASHVILLE, TN 37217-2698	62-1247492		180,250.	0.			AWARDING AND FINAL

Part II Continuation of Grants and Other A						Ī	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPPORTUNITY DEVELOPMENT CENTERS, INC 1191 HUNTINGTON AVE - WISCONSIN RAPIDS, WI 54494	39-1044318	501(C)(3)	64,896.	0.			GENERAL & PROGRAM RELATED
PARK PLACE ADULT DAY SERVICES 220 3RD AVE S SUITE 2 WISCONSIN RAPIDS, WI 54495	39-1533745	501(C)(3)	19,849.	0.			GENERAL & PROGRAM RELATED
ST. LUKE'S LUTHERAN CHURCH 2011 TENTH ST S WISCONSIN RAPIDS, WI 54494	39-6030914	501(c)(3)	8,000.	0.			GENERAL & PROGRAM RELATED
UNITED WAY OF SOUTH WOOD & ADAMS COUNTIES, INC 351 OAK STREET - WISCONSIN RAPIDS, WI 54494	39-1212595	501(C)(3)	6,893.	0.			GENERAL & PROGRAM RELATED
WISCONSIN HISTORICAL FOUNDATION, INC 816 STATE ST, PO BOX 260050 - MADISON, WI 53726-0050 WISCONSIN RAPIDS AREA SENIOR	39-0921093	501(C)(3)	117,885.	0.			GENERAL & PROGRAM RELATEI SUPPORT
CENTER ASSOCIATION, INC 220 3RD AVE S SUITE 126 - WISCONSIN RAPIDS, WI 54495	39-1408099	501(C)(3)	34,011.	0.			GENERAL & PROGRAM RELATED
WISCONSIN RAPIDS FAMILY CENTER, INC 500 25TH ST N - WISCONSIN RAPIDS, WI 54494	39-1451595	501(C)(3)	24,059.	0.			GENERAL & PROGRAM RELATED
WISCONSIN RAPIDS PUBLIC SCHOOLS 510 PEACH STREET WISCONSIN RAPIDS, WI 54494	39-6005282	501(C)(3)	60,803.	0.			GENERAL & PROGRAM RELATEI

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL SCHOLARSHIPS FOR PERSONS GENERALLY					
RESIDING IN SOUTH WOOD COUNTY, WI AREA	3	3,500.	0.		
<u></u>		3,000.			
Part IV Supplemental Information. Provide the information rec	quired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
FOR SCHOLARSHIPS, QUALIFYING RECIP	IENTS ARE	EVALUATEI	BASED ON	ESTABLISHED	
SCHOLARSHIP CRITERIA AND OTHER REL	EVANT FAC	TORS AND A	AWARDS ARE	RECOMMENDED	
BY A THIRD PARTY SCHOLARSHIP ADMIN	ISTRATOR,	CRITERIA	AND ELIGIB	ILITY ARE	
CONFIRMED BY INCOURAGE STAFF, ARE	APPROVED	BY THE BOA	ARD OF DIRE	CTORS AND	
ARE PAYABLE DIRECTLY TO A THIRD PA					
SCHOLARSHIP DIRECTLY TO THE EDUCAT					
GRANTS, A BOARD APPROVED SET OF IN					
GRANTS IS ADHERED TO INCLUDING, BU				_ · - 	

RECOMMENDATIONS FROM THE DONOR, CONFIRMING TAX EXEMPT STATUS, REVIEWING FORM 990'S WHEN AVAILABLE, SEEKING BOARD APPROVAL PRIOR TO AWARDING GRANTS OVER \$25,000, AND RECEIVING ACKNOWLEDGEMENTS FROM THE GRANTEE WITH RESPECT TO THE USE OF THE GRANT. FOR CERTAIN DESIGNATED AND UNRESTRICTED FUNDS, A SIMILAR PROCESS IS PERFORMED BY A COMMITTEE OF STAFF MEMBERS. FOR UNRESTRICTED GRANTS CALLED WHAT IF GRANTS, A RESIDENT REVIEW COMMITTEE, COMPRISED OF 3 RESIDENTS IN 2022, HOLDS MEETINGS AND ROTATES PARTICIPATION FOR GRANT REVIEWS ON AN AS NEEDED BASIS. FOR EACH OF SEVEN COMMUNITIES THAT HAVE A WHAT IF/PROGRESS FUND DESIGNATED TOWARD THEIR COMMUNITY, THERE IS A RESIDENT REVIEW COMMITTEE, WHICH COLLECTIVELY INVOLVED 28 RESIDENTS IN 2022. INCOURAGE STAFF PROVIDE ADMINISTRATIVE SUPPORT TO FOSTER THE DECISION MAKING, REVIEW AND APPROVAL PROCESS BY PERFORMING NECESSARY DUE DILIGENCE, INCLUDING REVIEWING FORM 990'S, SUPPORTING AND GUIDING SITE VISITS, DETERMINING THE DEPTH AND FREQUENCY OF REPORTING FROM A GRANT RECIPIENT WITH RESPECT TO THE GRANT, IN ACCORDANCE WITH BOARD APPROVED CRITERIA AND GUIDELINES.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

INTERNATIONAL SCHOLARSHIP AND TUITION SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: THIRD PARTY SCHOLARSHIP

ADMINISTRATOR FOR SUPPORTING SELECTION, AWARDING AND FINAL PAYMENT OF 173

SCHOLARSHIP AWARDS TO 109 RECIPIENTS

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

INCOURAGE COMMUNITY FOUNDATION, INC.

Employer identification number

39-1772651

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
4	Art - Works of art		nterns contributed	T Offit 990, I art vill, lifte 19				
1 2								
3	Art - Historical treasures Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	14	61,488.	FMV			
10	Securities - Closely held stock	21		01,400				
11	Securities - Closely field stock Securities - Partnership, LLC, or							
•••								
12								
13	Securities - Miscellaneous Qualified conservation contribution -							
13								
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles							
20	Food inventory							
21	Drugs and medical supplies							
22	Taxidermy Historical artifacts							
23	***************************************							
24	Scientific specimens Archeological artifacts							
2 4 25								
26	`							
20 27	<u> </u>							
28	Other () Other ()							
29	Number of Forms 8283 received by the organiz	ration during	the tax year for e	ontributions				
29	for which the organization completed Form 828	=	•					
	for which the organization completed form ozd	55, 1 alt v, L	onee Acknowledg	ement 29			Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I lines 1 throu	nh 28 that it		103	140
oou	must hold for at least 3 years from the date of t				-			
	exempt purposes for the entire holding period?					30a		Х
h	If "Yes," describe the arrangement in Part II.					ooa		
31	Does the organization have a gift acceptance p	olicy that re	auires the review	of any nonstandard contribu	tions?	31	Х	
	Does the organization hire or use third parties of					<u> </u>		
JŁU	contributions?					32a	х	
h	If "Yes," describe in Part II.					0£u		
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	y for which column (a) is che	cked			
-	describe in Part II.	o.a.i.ii (0 <i>)</i> 101	a type of property	, is willon obtaining as one	onou,			
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990).	Schedule M	1 (Forn	n 990)	2022

232141 09-09-22

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

INC. INCOURAGE COMMUNITY FOUNDATION,

Employer identification number 39-1772651

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PARTNERS WITH RESIDENTS, BUSINESSES, AND CIVIC LEADERS IN RURAL CENTRAL WISCONSIN TO CO-CREATE AN INCLUSIVE, ADAPTIVE, AND SUSTAINABLE COMMUNITY THAT WORKS WELL FOR ALL PEOPLE. INCOURAGE IS A VALUES-LED, USER-CENTERED, PLACE-BASED PHILANTHROPIC AND COMMUNITY DEVELOPMENT ORGANIZATION THAT PROMOTES COMMUNITY-LED PHILANTHROPY IN FURTHERANCE OF BUILDING COMMUNITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SIGNIFICANT DISINVESTMENT. TODAY, INCOURAGE PLAYS MANY ROLES IN COMMUNITY DEVELOPMENT: STEWARD, ADVOCATE, CONVENER, MODERATOR, TRAINER, GRANT-MAKER, INVESTOR, AND FUNDRAISER. INCOURAGE OPERATES RESEARCHER, FROM A CENTRAL BELIEF THAT PEOPLE ARE ITS MOST IMPORTANT ASSET, AND THAT POSITIVE COMMUNITY CHANGE HAPPENS WHEN SYSTEMATIC BARRIERS TO PARTICIPATION AND ENGAGEMENT ARE ELIMINATED SO THAT EVERY PERSON AND THE COMMUNITY CAN REALIZE THE POWER OF THEIR FULL POTENTIAL.

PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: REFLECTED AS A GRANT TO INTERNATIONAL SCHOLARSHIP AND TUITION SERVICES ON SCHEDULE I.

IN ADDITION TO MANY FUNDS DESIGNATED TOWARD SPECIFIED NONPROFIT SOME EXAMPLES OF COMMUNITY PHILANTHROPIC ACTIVITIES THAT ORGANIZATIONS, BENEFIT FROM INCOURAGE FUNDS DESIGNATED TOWARD THE ACTIVITY ARE: AN ADULT DRUG TREATMENT COURT, A VETERAN'S MEMORIAL, A COMMUNITY CHOIR, A A GROTTO, FREE ZOO PROGRAMS, A HANDICAP ACCESSIBLE CITY BAND LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization **Employer identification number** INCOURAGE COMMUNITY FOUNDATION, INC. 39-1772651 PLAYGROUND, AND VARIOUS COMMUNITY CAPITAL CAMPAIGNS (I.E. A SHORT TRACK RACING MEMORIAL). INCOURAGE "WHAT IF" AND "BRIDGE" GRANTS PROVIDE SUPPORT FROM UNRESTRICTED FUNDS. SOME EXAMPLES OF COMMUNITY INITIATED PHILANTHROPIC IDEAS AND ACTIVITIES SUPPORTED IN 2022 ARE: ADDING SAFETY EQUIPMENT AT A LOCAL BOXING CLUB, UPGRADING LIGHTING AND SUPPORTING "A WINDOW BETWEEN WORLDS" ART WORKSHOP FACILITATOR TRAINING AT A DOMESTIC ABUSE SHELTER, PURCHASING MATERIALS FOR A QUILTING CLUB TO MAKE QUILTS OF VALOR FOR LOCAL VETERANS, COVERING PRINTING COSTS FOR THE 2022 HELP GUIDE FOR SWC, SUPPORTING NATIONAL YOUTH LEADERSHIP TRAINING SCHOLARSHIPS, ADDING SAFETY EQUIPMENT AT A LOCAL HABITAT FOR HUMANITY, HELPING EQUIP AN AREA EMERGENCY COMMUNICATIONS TRAILER, FUNDING A FREE KIDZ ZONE AT A FREE COMMUNITY MUSIC FESTIVAL, HELPING FUND "SCIENCE OF MAGIC" OUTREACH WORKSHOPS FOR AREA SCHOOLS, AND A MATCHING GRANT FOR A NEW LOCAL TRANSITIONAL HOUSING LOCATION. INCOURAGE'S GRANTMAKING STRATEGIES ARE ALIGNED WITH THE MISSION AND VALUES DRIVEN PROGRAMS ALSO NOTED IN PART III LINES 1, 4B AND 4C. THE CONNECTEDNESS AND INTEGRATION OF A VARIETY OF GRANTS, PROGRAMS AND

INITIATIVES ALLOWS FOR A "COMMUNITY SPECIFIC" FRAMEWORK THROUGH WHICH COLLECTIVE RESOURCES CAN ACHIEVE GREATER IMPACT IN THE FORM OF SYSTEMS CHANGE AND COMMUNITY INVOLVEMENT.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: AFFORDABLE HOUSING. STARTING IN 2017, INCOURAGE DEVELOPED AND LAUNCHED A PASSIVE EQUITY INDEX FUND CALLED THE WISCONSIN SHARED STEWARDSHIP EQUITIES FUND ("WSSEF"). IT INCLUDES A CUSTOMIZED PORTFOLIO OF PUBLICLY TRADED COMPANIES THAT TILTS TOWARD COMPANIES THAT ARE BASED IN, OR EMPLOY PEOPLE IN WISCONSIN. IN ADDITION, THE WSSEF ALLOWS FOR PROXY

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

System of the organization and shareholder dialogue to encourage responsible practices and business growth in wisconsin. Starting in 2018, incourage, along with five other foundations, founded the wisconsin impact investing collaborative, an effort to help a wide variety of investors learn about and join with others in investing in inclusive, vibrant, and environmentally sustainable communities throughout wisconsin's urban, rural and tribal areas. Learn more about the collaborative at

TRIBUNE BUILDING PROJECT - AN ECONOMIC AND COMMUNITY HUB FOR SOUTHERN WOOD COUNTY AND CENTRAL WISCONSIN: INCOURAGE'S COMMITMENT TO PLACE-BASED INVESTING AND TO USER-CENTERED DECISION MAKING FOR SOUTHERN WOOD COUNTY'S FUTURE IS SYMBOLIZED BY THE CONTINUING RE-DEVELOPMENT OF THE FORMER DAILY TRIBUNE NEWSPAPER AND WFHR RADIO BUILDING, WHICH INCOURAGE PURCHASED THROUGH ITS SUPPORTING ORGANIZATION, COMMUNITY PROPERTY, INC., IN DECEMBER OF 2012. FROM THE BEGINNING, THE TRIBUNE BUILDING (THE "TRIBUNE"), A HISTORIC LOCAL MID-CENTURY PROPERTY LOCATED ON THE BANKS OF THE WISCONSIN RIVER IN DOWNTOWN WISCONSIN RAPIDS, WISCONSIN, HAS BEEN ABOUT MUCH MORE THAN REDEVELOPING A BUILDING. IT IS A DEMONSTRATION OF A USER-CENTERED PROCESS TOWARD REALIZING INCOURAGE'S VISION OF PARTNERING WITH RESIDENTS, BUSINESSES, AND CIVIC LEADERS IN RURAL CENTRAL WISCONSIN TO CO-CREATE AN INCLUSIVE, ADAPTIVE, AND SUSTAINABLE COMMUNITY THAT WORKS WELL FOR ALL PEOPLE. THE REDEVELOPED FACILITY WILL BE AN ECONOMIC AND COMMUNITY HUB TO SERVE AS A LABORATORY FOR INNOVATION FOR SOUTHERN WOOD COUNTY AND CENTRAL WISCONSIN WITH A PARTICULAR FOCUS ON THE NEEDS OF RURAL COMMUNITIES. IT WILL SERVE AS: A HUB FOR ENTREPRENEURIAL AND SMALL BUSINESS ACTIVITY, A FOCAL POINT OF REGIONAL COLLABORATION AND INNOVATION AMONG MAJOR INSTITUTIONAL DRIVERS

WWW.WI3C.ORG.

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

39-1772651

OF ECONOMIC CHANGE, AND A DYNAMIC COMMUNITY PLACE FOR WORK, PLAY, AND

COMMERCE. INCOURAGE HAS ENGAGED OVER 2,000 RESIDENTS IN THE PLANNING

AND DECISION-MAKING PROCESS SO FAR. THE TRIBUNE HAS BEEN DESIGNED TO

REFLECT RESIDENT PRIORITIES AND CAPITALIZE ON COMMUNITY AND REGIONAL

AS A RECAP OF THE JOURNEY SO FAR, PHASE ONE IN 2013 AND 2014 CONSISTED OF FOUR PUBLIC MEETINGS WHERE EVERYONE IN THE COMMUNITY WAS INVITED TO SHARE THEIR IDEAS FOR THE FUTURE USE OF THE SPACE, INCLUDING ENCOURAGING RESIDENTS TO SHIFT THEIR THINKING FROM "ME" TO "WE". PHASE TWO IN 2014, CONSISTED OF SEVEN PUBLIC MEETINGS WHEREBY THE COMMUNITY WAS INVITED TO PARTICIPATE IN ACTIVITIES RELATED TO THE DESIGN AND SUSTAINABILITY OF THE FACILITY. PHASE THREE IN 2015 AND 2016, CONSISTED OF TEN PUBLIC MEETINGS IN WHICH PARTICIPANTS FOCUSED ON DEEPENING RELATIONSHIPS, FURTHER DEFINING PROGRAMMING WITHIN THE FACILITY, AND DEVELOPING RESIDENT-LED FUNDRAISING OPPORTUNITIES TO HELP REALIZE THE BUILDING. IN 2017 AND 2018 COMMUNITY MEMBERS EXPLORED HOW SIMILAR PROJECTS IN OTHER REGIONS DEVELOPED, AND FUNDRAISING EFFORTS AT THE STATE AND NATIONAL LEVEL EXPANDED. IN 2019, THE STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION ANNOUNCED A \$3 MILLION MATCHING GRANT OPPORTUNITY FOR THE TRIBUNE'S FUTURE RECONSTRUCTION, AND INCOURAGE AND THE UNIVERSITY OF WISCONSIN-STEVENS POINT ANNOUNCED A COLLABORATION TO PROVIDE EXPERTISE FOR SUSTAINABLE ECONOMIC CHANGE IN CENTRAL WISCONSIN. DURING 2020 THROUGH 2022 COLLABORATIONS WITH KEY STAKEHOLDERS IN REGIONAL ECONOMIC TRANSFORMATION AND GROWTH CONTINUED DESPITE THE CHALLENGES PRESENTED BY COVID INTERRUPTIONS TO BUSINESS AS USUAL. A FEASIBILITY STUDY INITIATED IN LATE 2022 INDICATES PROMISING OPPORTUNITIES TO BE PURSUED IN 2023 AND BEYOND TOWARD REALIZING THE

ASSETS.

Name of the organization Employer identification number INCOURAGE COMMUNITY FOUNDATION, INC. 39-1772651

FULL POTENTIAL OF THIS IMPORTANT COMMUNITY ASSET.

TO DATE, OVER 2,000 RESIDENTS HAVE PARTICIPATED IN THIS MULTI-YEAR

PLANNING PROCESS, INCLUDING WORKING TOGETHER TO PRIORITIZE END-USE

IDEAS THAT WILL CELEBRATE LOCAL ASSETS, CONNECT RESIDENTS, AND ACT AS A

CATALYST FOR FUTURE DOWNTOWN DEVELOPMENT. AT ITS CORE, THE TRIBUNE WILL

BE A TRUE COMMUNITY SOCIAL ENTERPRISE FOCUSED ON CULTIVATING

ENTREPRENEURS AND GROWING A SUSTAINABLE LOCAL ECONOMY. (SEE

INCOURAGECF.ORG/LEAD/TRIBUNE-BUILDING, FOR MORE).

"BELOVED ECONOMIES - TRANSFORMING HOW WE WORK": IN THE FALL OF 2018, BUILDING UPON THE RESIDENT-LED DESIGN PROCESS FOR THE TRIBUNE, INCOURAGE CONVENED THE SUSTAINABLE COMMUNITIES WORKING GROUP, A DIVERSE CIRCLE OF 22 RESIDENTS FROM OUR REGION. IN 2018 AND 2019 THIS GROUP ENGAGED RESIDENTS FROM ACROSS OUR COMMUNITY TO CO-CREATE A "BLUEPRINT" FOR THE SUSTAINABLE COMMUNITY THAT OUR REGION CAN BECOME. INCOURAGE COLLABORATED WITH JOANNA CEA AND JESS RIMINGTON TO HELP DESIGN A PROCESS OF CUTTING-EDGE CO-CREATION. THEIR WORK AND RESEARCH AS VISITING SCHOLARS AT STANFORD UNIVERSITY'S GLOBAL PROJECTS CENTER IS REPRESENTED IN THE STANFORD SOCIAL INNOVATION REVIEW ARTICLE, "CREATING BREAKOUT INNOVATION", WHICH FOCUSED ON COLLABORATIVE PROCESSES FOR COMMUNITY TRANSFORMATION. INCOURAGE FACILITATED A PROCESS THAT PLACED RESIDENTS IN THE DRIVER'S SEAT TO IDENTIFY A SET OF PRACTICES TO REALIZE OUR COMMUNITY'S VISION OF A SUSTAINABLE FUTURE. AT JOANNA AND JESS'S REQUEST, IN 2020 AND 2021 INCOURAGE JOINED A CO-LEARNING TEAM THEY ASSEMBLED TO CONTINUE RESEARCHING AND WRITING "BELOVED ECONOMIES -TRANSFORMING HOW WE WORK", WHICH OFFERS A COMPELLING VISION OF A WORLD IN WHICH THE RELATIONSHIP BETWEEN WORK, THE ENVIRONMENT AND HUMAN

Name of the organization **Employer identification number** 39-1772651 INCOURAGE COMMUNITY FOUNDATION, INC. FLOURISHING IS ONE OF HARMONY RATHER THAN FRICTION AND INEQUITY. THIS PAPERBACK BOOK, RELEASED IN AUGUST OF 2022, HAS BEEN CO-CREATIVELY SHAPED BY MORE THAN 100 PEOPLE, INCLUDING SEVERAL INCOURAGE STAFF AND VOLUNTEERS, EACH WITH A COMMITMENT TO, AND STRONG PRACTICE OF, CHANGING HOW WE WORK TO EMBRACE POWER-SHARING WAYS THAT DEPART FROM BUSINESS AS USUAL. THE BOOK OFFERS SEVEN SPECIFIC PRACTICES AS A SPRINGBOARD FOR CHANGING HOW WE WORK AND SEVERAL EXAMPLES OF INCOURAGE'S WORK ARE INCLUDED IN SUPPORT OF SHOWING THAT IT'S NOT ONLY WHAT WE DO, BUT HOW WE DO IT THAT CAN BE POWERFUL LEVERS TO MOVE US INTO ECONOMIES THAT ALL OF US CAN LOVE. REALIZING THE POWER OF OUR POTENTIAL IS AT THE HEART OF WHAT INSPIRES INCOURAGE TO KEEP PUSHING THE ENVELOPE OF WHAT IS POSSIBLE IN OUR REGION, AND TO CONTINUE TO EXPLORE WHAT OUR ROLE SHOULD BE AS A COMMUNITY FOUNDATION OPERATING BY AND FOR THE PEOPLE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

AND EMERGING MODELS FURTHER (SEE

INCOURAGECF.ORG/LEAD/NATIONAL-PARTNERS, FOR MORE).

AS AN EXAMPLE, TO PROMOTE COMMUNITY PROSPERITY BUILT ON VALUING WORKERS, SUPPORTING LOCAL EMPLOYERS, AND INVESTING IN ECONOMIC GROWTH, BETWEEN 2008 AND 2016 INCOURAGE, AS ONE OF THE FIRST RURAL ORGANIZATIONS NATIONWIDE CHOSEN BY THE NATIONAL FUND FOR WORKFORCE SOLUTIONS (NFWS), LED A PROJECT SITE THROUGH ITS IMPLEMENTATION PARTNER JOBS FOR THE FUTURE, INC. THE LOCAL NFWS INITIATIVE, WORKFORCE CENTRAL, PURSUED A DUAL-CUSTOMER, SECTOR-BASED APPROACH FOR ADVANCING WORKERS INTO JOBS WITH FAMILY SUSTAINING WAGES. ENHANCING THE INTEGRATION OF

Employer identification number 39-1772651

SOCIAL SERVICES AND MOBILIZATION OF COMMUNITY ORGANIZATIONS WAS A CORE

ELEMENT OF THIS PHILANTHROPIC-LED STRATEGY. COMMUNITY COLLABORATION

EFFORTS HAPPENED BETWEEN GROUPS THAT MAY NOT HAVE TRADITIONALLY WORKED

CLOSELY TOGETHER TO SOLVE WORKFORCE ISSUES. SINCE 2016, INCOURAGE

WORKED WITH COMMUNITY PARTNERS AND TRANSITIONED THESE PROGRAMS TO

PERMANENT HOMES, INCLUDING MID STATE TECHNICAL COLLEGE AND VARIOUS

LOCAL MANUFACTURERS. (SEE INCOURAGECF.ORG/LEAD/WORKFORCE-CENTRAL-2, FOR MORE).

AS ANOTHER EXAMPLE, STARTING IN 2008, INCOURAGE BEGAN PARTICIPATING IN THE JOHN S. AND JAMES L. KNIGHT FOUNDATION'S COMMUNITY INFORMATION CHALLENGE, FOCUSING ON USER-CENTERED PROCESSES TO CREATE A MORE INFORMED, ENGAGED, AND CONNECTED COMMUNITY. IN 2012 AND AGAIN IN 2017/2018, INCOURAGE SURVEYED APPROXIMATELY 4,000 RESIDENTS TO BETTER UNDERSTAND THEIR CURRENT HOPES AND CONCERNS AND HOW THEIR GOALS AND PERSPECTIVES HAD CHANGED. THE CONVERSATIONS WERE ALSO INFORMED BY RESEARCH INTO LOCAL DATA TO PRODUCE VITAL SIGNS TYPE REPORTS AND THEN TO HOST CRITICAL COMMUNITY CONVERSATIONS FOR INFORMING STRATEGY AND ACTION WITH TIMELY, ACCURATE AND RELEVANT DATA (SEE INCOURAGECF.ORG/LEARN/VITAL-SIGNS, FOR MORE). THE MAIN PRIORITIES IDENTIFIED BY THE COMMUNITY IN 2017/2018 WERE SIMILAR TO 2012 AND INCLUDED: GOOD QUALITY JOBS ARE ACCESSIBLE TO ALL, QUALITY EDUCATION FOR CHILDREN AND ADULTS, ATTRACTING AND RETAINING YOUNG ADULTS AND FAMILIES, SUPPORT FOR LOCAL ENTREPRENEURS AND BUSINESS OWNERS, AND HAVING A HIGHLY TRAINED AND COMPETITIVE WORKFORCE. IN 2018 THE SURVEY RESULTS WERE DISCUSSED WITH MORE THAN 30 COMMUNITY PARTNERS AND WITH THE BROADER COMMUNITY AT A PUBLIC FORUM, AND THE RESULTS ARE ALSO LOCATED ON INCOURAGE'S WEBSITE. THESE PRIORITIES CONTINUE TO INFORM

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

INCOURAGE'S STRATEGY AND INCOURAGE IS COMMITTED TO HELPING THE

COMMUNITY COORDINATE EFFORTS FOCUSED ON COMMUNITY PRIORITIES AND A

SHARED VISION FOR THE FUTURE. (SEE

INCOURAGECF.ORG/LEAD/COMMUNITY-INFORMATION, AND /COMMUNITY-SURVEY-2017

FOR MORE).

SOME ADDITIONAL PROGRAMS LED OR INSPIRED BY INCOURAGE INCLUDE ADAPTIVE

LEADERSHIP PROGRAMS, TEEN LEADERSHIP PROGRAMS, EDUCATIONAL WORKSHOPS

AND TRAINING OPPORTUNITIES (ORGANIZATIONAL, LEADERSHIP AND PROGRAM

DEVELOPMENT; COLLABORATION AND COMMUNITY ENGAGEMENT; EVALUATION

EFFECTIVENESS, ETC.), PUBLIC SPEAKERS, PROMOTING CIVILITY, PROMOTING

CIVIC ENGAGEMENT, ETC.

A CIVILITY PROJECT OF INCOURAGE, SPEAK YOUR PEACE, EXPERIENCED A
RESURGENCE IN REQUESTS FOR PRESENTATIONS STARTING IN 2021. INCOURAGE
ORIGINALLY ADOPTED THE NINE TOOLS OF CIVILITY AT THE CENTER OF THE
INITIATIVE IN 2008, FROM A PROGRAM AT THE DULUTH-SUPERIOR AREA
COMMUNITY FOUNDATION. THIS RESIDENT-LED CAMPAIGN SEEKS TO IMPROVE
COMMUNICATION BY REMINDING OURSELVES OF THE BASIC PRINCIPLES OF
RESPECT. IT IS NOT A CAMPAIGN TO END DISAGREEMENTS. PRACTICING CIVILITY
IS HOW YOU GET GOOD, AND HOW A COMMUNITY GETS GREAT. THE NINE TOOLS
INCLUDE: 1-PAY ATTENTION, 2-LISTEN, 3-BE INCLUSIVE, 4-DON'T GOSSIP,
5-SHOW RESPECT, 6-SEEK COMMON GROUND, 7-REPAIR DAMAGED RELATIONSHIPS,
8-USE CONSTRUCTIVE LANGUAGE, AND 9-TAKE RESPONSIBILITY. INCOURAGE IS
WORKING ON WAYS TO HAVE MORE PRESENTATION OPPORTUNITIES AVAILABLE FOR
PRACTICING HAVING DIFFICULT CONVERSATIONS WITH CIVILITY, KINDNESS, AND
RESPECT (SEE INCOURAGECF.ORG/LEAD/ADAPTIVE-LEADERSHIP &

Schedule O (Form 990) 2022

SPEAK-YOUR-PEACE OR SPEAKYOURPEACESWC.ORG FOR MORE).

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

Employer identification number 39-1772651

INCOURAGE IS COMMITTED TO LEARN, REFLECT, AND ACT ON WHAT IT MEANS TO

BE AN AUTHENTICALLY USER-CENTERED, VALUES-LED, PLACE-BASED

PHILANTHROPIC ORGANIZATION THAT RECOGNIZES THAT TANGIBLE CHANGES WITHIN

THE COMMUNITY CULTURE AND ITS SUPPORTING SYSTEMS TAKE PERSISTENCE,

PATIENCE, AND TIME; BECAUSE IT BELIEVES THAT WHEN IT KNOWS BETTER, IT

CAN DO BETTER.

FORM 990, PART VI, SECTION B, LINE 11B:

UPON COMPLETION OF FORM 990 BY A THIRD PARTY ACCOUNTING FIRM (ACCOMPLISHED WITH SIGNIFICANT INPUT FROM A VARIETY OF STAFF MEMBERS) THE CHIEF FINANCIAL OFFICER SHARES THE FINAL FORM 990 DRAFT WITH EACH BOARD MEMBER AND CERTAIN STAFF MEMBERS PRIOR TO FILING, SEEKING THEIR REVIEW AND COMMENTS ON THE DRAFT. ANY COMMENTS RECEIVED ARE REVIEWED FOR WHETHER AN ADJUSTMENT NEEDS TO BE MADE TO THE FILING. AFTER ALL COMMENTS ARE CLEARED, THE FINAL FORM 990 IS POSTED FOR ALL BOARD MEMBERS AND CERTAIN STAFF MEMBERS, NOTING ANY SIGNIFICANT ADJUSTMENTS MADE AS A RESULT OF THEIR REVIEW, AND THE FINAL FORM 990 IS SUBMITTED TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST DISCLOSURE FORMS ARE COMPLETED BY THE BOARD OF

DIRECTORS, STAFF, AND MOST COMMITTEES. WHEN POTENTIAL CONFLICTS OF

INTEREST ARISE, THE CONFLICTED PERSON IS ALLOWED AN INITIAL OPPORTUNITY FOR

INPUT TO THE DISCUSSION WITH FINAL DISCUSSIONS AND VOTING, IF ANY, DONE

WITHOUT THEIR INPUT.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS REVIEWS CEO/MANAGING DIRECTOR PAY ANNUALLY TAKING

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization

INCOURAGE COMMUNITY FOUNDATION, INC.

Employer identification number 39-1772651

COMPARATIVE PAY DATA INTO CONSIDERATION, INCLUDING REGIONAL AND NATIONAL

FOUNDATIONS AS WELL AS COMMUNITY DEVELOPMENT ORGANIZATIONS AND DATA ON

PEERS WITH WHOM OUR CEO/MANAGING DIRECTOR IS MOST COMPARABLE. THE

CEO/MANAGING DIRECTOR RECOMMENDS STAFF PAY AND THE BOARD OF DIRECTORS

REVIEWS STAFF POSITIONS AND OVERALL PAY THROUGH THE FORECASTING PROCESS,

TAKING COMPARATIVE PAY DATA INTO CONSIDERATION WHERE AVAILABLE AND

APPROPRIATE.

FORM 990, PART VI, SECTION C, LINE 18:

THE MOST CURRENT FORMS 990 AND 990-T ARE POSTED ON INCOURAGE'S WEBSITE AT INCOURAGECF.ORG/ABOUTUS/FINANCIALS. FORM 1023 AND THE TWO PRIOR YEAR FORMS 990 AND 990-T ARE AVAILABLE UPON WRITTEN REQUEST AT INCOURAGE COMMUNITY FOUNDATION, INC., ATTENTION FINANCE, 478 EAST GRAND AVENUE, SUITE 200, WISCONSIN RAPIDS, WI 54494, OR BY EMAIL REQUEST TO HELLO@INCOURAGECF.ORG TO THE ATTENTION OF FINANCE.

FORM 990, PART VI, SECTION C, LINE 19:

DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST AT INCOURAGE COMMUNITY

FOUNDATION, INC. ATTENTION: FINANCE, 478 EAST GRAND AVENUE, SUITE 200,

WISCONSIN RAPIDS, WI 54494, OR BY EMAIL REQUEST TO HELLO@INCOURAGECF.ORG TO

THE ATTENTION OF FINANCE. THE MOST RECENT AUDITED CONSOLIDATED FINANCIAL

STATEMENT IS AVAILABLE ON INCOURAGE'S WEBSITE AT

INCOURAGECF.ORG/ABOUT-US/FINANCIALS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PREVIOUS YEARS GRANT CANCELLATIONS AND/OR REFUNDS

56,190.

FORM 990, PART XII, LINE 2C

Schedule O (Form 990) 2022 Name of the organization INCOURAGE COMMUNITY FOUNDATION, INC. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. THE FULL INCOURAGE BOARD FULFILLS THESE RESPONSIBILITIES. FORM 990, PART I, LINE 5 INCOURAGE HAD 7 EMPLOYEES AT 12-31-2022, ALL OF WHOM WERE PART-TIME. BEGINNING 1-1-2020, ALL INCOURAGE EMPLOYEES ARE CO-EMPLOYED BY INCOURAGE AND TANDEM HR (FORMERLY KNOWN AS QTI HUMAN RESOURCES, INC.), A PROFESSIONAL EMPLOYER ORGANIZATION (PEO).		
	Employer identification number 39-1772651	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. THE FULL	INCOURAGE	
BOARD FULFILLS THESE RESPONSIBILITIES.		
	, , ,	
	_	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

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

(c)

(d)

(e)

Attach to Form 990.

(b)

OMB No. 1545-0047
2022

Open to Public Inspection

Name of the organization

(a)

Department of the Treasury Internal Revenue Service

INCOURAGE COMMUNITY FOUNDATION, INC.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Employer identification number 39-1772651

(f)

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Primary activity Legal domicile (state or foreign country)		ome End-of-yea		controlling ntity	g
Part II Identification of Related Tax-Exempt Organizations during the toy was in the control of	anizations. Complete if the organizatio	n answered "Yes" on Form 990	D, Part IV, line 34, I	because it had one	e or more related tax-exe	mpt	
organizations during the tax year. (a)	(b)	(c)	(d)	(e)	(f)	1 1	(a)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling	ent	trolled tity?
OMMUNITY PROPERTY INC - 26-0425048					INCOURAGE COMMUNITY	Yes	No
78 EAST GRAND AVENUE, SUITE 200 VISCONSIN RAPIDS, WI 54494-4852	SUPPORTING ORGANIZATION	WISCONSIN	501(C)(3)	LINE 12B, II	FOUNDATION, INC.	х	
For Paperwork Reduction Act Notice, see the Instru	ctions for Form 990.				Schedule R	(Form 90	90) 30

		0 11 200 1 1	"\"	
David III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 34	, because it had one or more related
	organizations treated as a partnership during the tax year.		, ,	•
	organizations treated as a partnership during the tax year.			

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

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

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

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Х	
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d	X	
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		X
	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
	Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	
	n Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q	Х	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

2 If the answer to any of the above is Tes, see the instructions for information on w	Tio must complete th	ilo ililo, iliolaaling coverca i	Clationships and transaction thresholds.
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) COMMUNITY PROPERTY, INC.	A	41,340.	CURRENT YEAR ACCRUED INTEREST
(2) COMMUNITY PROPERTY, INC.	D	2,107,000.	FACE VALUE OF PROMISSORY NOTES
(3) COMMUNITY PROPERTY, INC.	D	223,500.	STATED AMOUNT OF LOAN GUARANTEE
(4) COMMUNITY PROPERTY, INC.	D	296,570.	TOTAL ACCRUED INTEREST PROM NOTES
(5) COMMUNITY PROPERTY, INC.	В	50,000.	GRANT AMOUNT PAID
(6)			

Schedule R (Form 990) 2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
								000) 0000

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print INCOURAGE COMMUNITY FOUNDATION, INC. 39-1772651 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 478 E. GRAND AVENUE, 200 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. WISCONSIN RAPIDS, WI 54494 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) DAWN NEUMAN • The books are in the care of ▶ 478 E GRAND AVE, SUITE 200 - WISCONSIN RAPIDS, WI 54494 Telephone No. ► 715-423-3863 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)