PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 12947
| Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

ΑI	or the	lpha 2022 calendar year, or tax year beginning $$ J U $$ L $$ , $$ 2 $$ U $$ 2 $$ $$ and $$ $$	ل ending	UN 30, 202.	3					
В	Check if applicable	C Name of organization		D Employer identi	fication number					
	Addre	IMPACT NW		]						
	Name chang	Doing business as		93-0557	964					
	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 33530	E Telephone number 503-721-1740							
	termin ated		G Gross receipts \$	16,294,598.						
	Ameno									
	Applic			H(a) Is this a group for subordinate						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates						
T -	Гах-ех	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) o	or 527	1 ` ′	a list. See instructions					
	Websit		02,	H(c) Group exempt						
		organization: X Corporation Trust Association Other	1 Year		M State of legal domicile; OR					
	art I	Summary	<b>L</b> 1001	01101111ation; = 2 0 0 1	otato or logar dominono.					
	1	Briefly describe the organization's mission or most significant activities: TO PR	REVENT	HOMELESSNE	ESS BY					
Governance	'	PARTNERING WITH PEOPLE AS THEY NAVIGATE T								
nar	2	Check this box if the organization discontinued its operations or dispose								
Ver	3			3	1					
ဗိ	4	Number of independent voting members of the governing body (Part VI, line 1b)								
<b>ა</b> გ	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)								
Activities &	6	Total number of volunteers (estimate if necessary)								
ξį	7 a	Total unrelated business revenue from Part VIII, column (C), line 12								
Ă	b	Net unrelated business taxable income from Form 990-T, Part I, line 11								
				Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)		13,342,728	15,680,482.					
aμι	9	Program service revenue (Part VIII, line 2g)		429,618	<del></del>					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		69,274						
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,478	<del></del>					
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		13,863,098						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,786,182						
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.						
40	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,302,701						
ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0						
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25) 346,05	50.							
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,776,493	2,283,759.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,865,376	<u> </u>					
	1	Revenue less expenses. Subtract line 18 from line 12		-2,278						
		Troverside 1000 experisees. Outstates fine 10 from line 12	Be	ginning of Current Year	<del></del>					
Net Assets or	20	Total assets (Part X, line 16)		4,522,313						
ASS	21	Total liabilities (Part X, line 26)		1,765,401	<del>-</del>					
\et	22	Net assets or fund balances. Subtract line 21 from line 20		2,756,912						
Pa	art II	Signature Block		, , .	1 - 7 - 7 -					
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of r	ny knowledge and belief, it is					
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			,					
	,									
Sig	n	Signature of officer		Date						
Her		ANDY NELSON, EXECUTIVE DIRECTOR								
		Type or print name and title								
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN					
Paid	i	GERARD DEBLOIS		if self-emp	p01287653					
	parer	Firm's name MCDONALD JACOBS, P.C.			93-0900579					
	Only	Firm's address 121 SW SALMON ST., STE 1100		THIII S LIN						
		PORTLAND, OR 97204		Phone no. (	503) 227-0581					
May	/ the IF	RS discuss this return with the preparer shown above? See instructions		1 Hono Ho. (	X Yes No					
	,									

93-0557964 Page **2** IMPACT NW Form 990 (2022)

Pa	t 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:
	IMPACT NW PREVENTS HOMELESSNESS BY SUPPORTING PEOPLE AS THEY NAVIGATE
	THEIR JOURNEY TO STABILITY AND STRENGTH. FOUNDED IN PORTLAND IN 1966,
	IMPACT NW NOW SERVES 25,000 PEOPLE A YEAR IN THE GREATER PORTLAND,
	OREGON METRO AREA, INCLUDING CLARK COUNTY WASHINGTON. (CONT. ON SCH O)
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?
	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.  (Code:) (Expenses \$7 , 485 , 444 including grants of \$2 , 603 , 381 ) (Revenue \$353 , 635 )
40	(Code:) (Expenses \$/, 485, 444 including grants of \$/, 503, 581) (Revenue \$)  AS THE PORTLAND-VANCOUVER REGION STRUGGLES WITH A DEEPENING HOUSING
	CRISIS, AND THE CONTINUED POST COVID PANDEMIC AFFECTS, THE ORGANIZATION
	PARTNERED WITH MORE THAN 24,618 PEOPLE DURING THE YEAR ENDING JUNE 30,
	2023 TO HELP THEM OVERCOME FINANCIAL CHALLENGES, STABILIZE AND MAINTAIN
	THEIR HOUSING. THE ORGANIZATION HELPED PEOPLE OF ALL AGES AND FAMILIES
	NAVIGATE SYSTEMS TO RECEIVE RENT AND HOUSING ASSISTANCE, UTILITY
	ASSISTANCE AND OTHER SERVICES. THE ORGANIZATION ALSO CONNECTED CLIENTS
	TO HEALTHCARE, EMPLOYMENT AND EDUCATION. SPECIFIC POPULATIONS SERVED
	INCLUDE VETERANS, SENIORS, FAMILIES, INDIGENOUS, BLACK, BROWN,
	MELANATED, IMMIGRANT AND ASIAN COMMUNITIES AND THE SLAVIC COMMUNITY.
4b	(Code:) (Expenses \$ 5,952,584. including grants of \$ 371,975. ) (Revenue \$ 228,437. )
	THE ORGANIZATION ALSO WORKED "UPSTREAM" TO PROVIDE OPPORTUNITIES TO
	MORE THAN 5,904 PEOPLE AT RISK OF HOUSING INSTABILITY. A "THRIVE BY
	FIVE" EFFORT HELPED YOUNG CHILDREN AND THEIR FAMILIES BUILD LASTING
	BONDS, PREPARING THEM FOR SCHOOL AND LIFE-LONG CONNECTION. AFTER-SCHOOL
	PROGRAMS HELPED SCHOOL CHILDREN AND SCHOOL COMMUNITIES DEVELOP SKILLS AND EXPERIENCES THAT BUILT ON CLASSROOM LEARNING, WHILE PROVIDING SAFE
	SPACES FOR WORKING FAMILIES. JOB TRAINING HELPED YOUNG PEOPLE AGES 16
	TO 25 CONNECT WITH EMPLOYMENT IN MANUFACTURING AND OTHER TRADES.
	10 25 COMMET WITH DIFFERENT IN PRINCIPACIONING AND OTHER TRADES.
4c	(Code:) (Expenses \$ 99,785 • including grants of \$1,955 • ) (Revenue \$)
	IN ADDITION TO SERVICES THAT STABILIZE AND STRENGTHEN, THE ORGANIZATION
	EXPANDED ITS ANTI-RACISM EFFORTS THROUGH TRAINING ON A VARIETY OF
	TOPICS AND BY PROVIDING COMMUNITY EDUCATION ON RELEVANT ISSUES
	AFFECTING INDIGENOUS, BLACK, BROWN, MELANATED, IMMIGRANT AND ASIAN
	COMMUNITIES.
/I el	Other program convices (Describe on Schedule O.)
4d	Other program services (Describe on Schedule O.)
4e	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses 13,537,813.
10	Form 990 (2022)

232002 12-13-22

93-0557964 Page **3** 

# Form 990 (2022) IMPACT NW Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	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		Х
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		Х
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? <i>If</i> "Yes," <i>complete</i>	<u> </u>		<del> </del>
Ü	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	۰		<del></del>
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		X
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
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,		37	
	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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> X</u>
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	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	. <del>.</del>		<del></del> -
	,	19		X
20a	complete Schedule G, Part III	20a		X
	• • •	20a		<del>  ^</del>
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		$\vdash$
21		21		x
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	<u> </u>		_ 41

232003 12-13-22

93-0557964 Page 4

	Form 990 (	2022	IMPACT NW	
Ì	Part IV	Ch	ecklist 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	X	
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		Х
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		Х
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		Х
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		х
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? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
Ŭ	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		Х
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	<del>                                     </del>		
02	•	32		Х
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 33		
J-7	Part V, line 1	34		Х
35.2	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	300		
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 37		
30	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai		_ 55		
	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		. 50	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
J	(gambling) winnings to prize winners?	1c		
	V V V		990	(0.0.0.)

232004 12-13-22

<u>F</u>	orm	990 (2022) IMPACT NW		93-0557	964	P	age
	Pai	TV 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	292			
	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X

Za	Effici the number of employees reported on Form w-5, Transmittar of wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	<b>2</b> a	292			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	X	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account	accoun	t)?	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 A	ccount	s (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			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 orga	nization 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 contribut	ons or	gifts			
_	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				X	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a	X	
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	-		7.		Х
4	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7d		7с		21
e	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		·?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribute organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribute organization.		:?	7 <del>f</del>		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
				8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		•			
а	Initiation fees and capital contributions included on Part VIII, line 12	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:		l			
	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	l l				
40	amounts due or received from them.)	11b		40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	, 	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.			104		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
-	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c		1		
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incon	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

93-0557964 IMPACT NW Form 990 (2022)

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.

	Check if Schedule O contains a response or note to any line in this Part VI				Λ
Sec	tion A. Governing Body and Management			.,	·
		17		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year				
	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.	1 7			
b	Enter the number of voting members included on line 1a, above, who are independent	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	on			
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		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 appoint one or				
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
а	The governing body?		8a	Х	
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 reached at 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 Revenue 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 chapters, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?	11a	X	
b					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	, , , , , , , , , , , , , , , , , , , ,		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				
	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 approval by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	, , , , , , , , , , , , , , , , , , , ,		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 arrangement with 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 its participation	1			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
<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 OR				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (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 Other (explain on Schedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	policy, and	finan	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 books and records				
	ANDY NELSON - 503-804-8796				
	4610 SE BELMONT STREET, PORTLAND, OR 97215				

4731\_\_\_1

13440515 781409 4731

Form 990 (2022) IMPACT NW 93-0557964 Page 7

# 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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one n an	(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) ANDY NELSON	40.00	-		ν,				175 060	0	0.65
EXECUTIVE DIRECTOR	40.00			Х				175,262.	0.	865.
(2) ALMEIDA, EDDIE	40.00	-				\		116 011	0.	065
(3) KENDRA JOHNSON	40.00					X		116,911.	0.	865.
DEPUTY DIRECTOR	40.00	1				X		111,490.	0.	865.
(4) DORTCH, ADA	40.00								•	
DEVELOPMENT DIRECTOR		1				x		107,023.	0.	865.
(5) AMY GEE	1.00							,	-	
CHAIR		Х		Х				0.	0.	0.
(6) ANTHONY EDDINGS	1.00									
SECRETARY		Х		Х				0.	0.	0.
(7) RICHARD DIFORIO	1.00									
TREASURER		Х		Х				0.	0.	0.
(8) CHRIS SCHERER	1.00									
MEMBER		Х						0.	0.	0.
(9) JEFF FOLEY	1.00									
MEMBER		Х						0.	0.	0.
(10) CHAD MELVIN	1.00									
MEMBER		Х				_		0.	0.	0.
(11) MAURICE PAM	1.00									
MEMBER	1 00	Х				_		0.	0.	0.
(12) ROBERT COUNTRYMAN	1.00	<b>.</b> ,							,	0
MEMBER (12) GUELLEW WORLD	1 00	X				_		0.	0.	0.
(13) SHELLEY YODER MEMBER	1.00	Х						0.	0.	0.
(14) PATRICK SHEN	1.00	Λ				$\vdash$		0.	0.	U •
MEMBER	1.00	Х						0.	0.	0.
(15) ADRIENNE LIVINGSTON	1.00	77						0.	0.	<u></u>
MEMBER	1.00	х						0.	0.	0.
(16) FRANCES SALLAH	1.00									
MEMBER		Х						0.	0.	0.
(17) SONAL SHAH	1.00									
MEMBER		Х						0.	0.	0.
										Form 990 (2022)

232007 12-13-22 Form **990** (2022)

93-0557964 Page 8 IMPACT NW Form 990 (2022)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B)			(C)					(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one					no	Reportable	Reportable		E	stimate	ed
	hours per	box	, unles	ss pers	son is	s both	an	compensation	compensation		aı	mount	of
	week	_	cer an	a a air	recto	r/trus	ee)	from	from related			other	
	(list any hours for	or director						the	organizations	,		npensa	
	related	or di	ee e			sated		organization	(W-2/1099-MISC	′		rom th	
	organizations	rustee	l trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		•	ganizat Id relat	
	below	dual t	Institutional trustee	_	nploy	st col	in in	10001120)				anizati	
	line)	Individual trustee	Institu	Officer	Key employee	Highest compensated employee	Former				3		
(18) LINDA KING	1.00		П							コ			
MEMBER		Х						0.	(	).			0.
(19) PHIL DOLLAR	1.00									$\Box$			
MEMBER		Х						0.	(	).			0.
(20) DEMIAN LUCAS	1.00												
MEMBER		Х	Ш					0.	(	).			0.
(21) HAI NGUYEN	1.00												
MEMBER		Х	Ш					0.	(	).			0.
										$\dashv$			
			Ш							$\dashv$			
										$\dashv$			
			Ш	-						$\dashv$			
								F10 606	(	$\dashv$		3,4	60
1b Subtotal								510,686.		0.		3,4	0.
c Total from continuation sheets to Part VII								510,686.		).		3,4	
d Total (add lines 1b and 1c)								•		<u>, •  </u>		J, =	00.
compensation from the organization	or infinited to the	056	11216	u ab	OVE	) WII	o ie	ceived more than \$100,	ooo or reportable				4
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,	director trusto	ee k	ev e	mple	ove	e or	hia	hest compensated empl	ovee on	Γ			
line 1a? If "Yes," complete Schedule J for su	,	,	,	•	,	•	_	most compensated emp	•	ı	3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150			•					•	•	ı	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													
1 Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ntra	actor	s th	nat received more than \$	100,000 of compe	nsat	ion fr	om	
the organization. Report compensation for t	he calendar ye	ear e	ndin	ıg wi	ith o	r wi	hin	the organization's tax y	ear.				
(A)								(B)				C)	
Name and business							$\Box$	Description of s	ervices	C	ompe	ensatio	n
SPRUCE IT AND CLOUD SERVI							- 1	IT AND CLOUD					
7513 NW VISTA AVE., VANCO	UVER, W	A	98	665	5			SERVICES			<u>27</u>	0,6	<u>11.</u>
							$\dashv$						
							$\dashv$			—			
2 Total number of independent contractors (in	oludina but	o+ 1:	nitod	1+~ +	har	o lie	ارم	abovo) who received ===	oro than				
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ا ااا	inteo	ו נט נ	.nos		LEU	above) who received mo	חבוומוו				

93-0557964 Page 9

		Check if Schedule O contains a response	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
S (0	1 2	Federated campaigns 1a					
ants							
5 5							
ts, Ar							
ij gi		•	10 264 201				
ns, Sim		Government grants (contributions)	10,264,201.				
atio er (	Ť	All other contributions, gifts, grants, and	F 41.6 201				
ĕĦ		similar amounts not included above 1f	5,416,281.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines 1a-1f	79,087.	15 600 400			
<u>0</u> <u>p</u>	h	Total. Add lines 1a-1f		15,680,482.			
			Business Code				
çe	2 a		624200	497,448.	497,448.		
e <u>Š</u>	b	MANAGEMENT & ADMINISTRATION	541610	84,624.	84,624.		
Suna	С	:					
am	d	l					
Program Service Revenue	е						
ሷ	f	All other program service revenue					
	g	Total. Add lines 2a-2f		582,072.			
	3	Investment income (including dividends, inter	est, and				
		other similar amounts)		1,049.			1,049.
	4	Income from investment of tax-exempt bond					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 3	Gross rents 6a 23,819					
		Less: rental expenses 6b 0					
		Rental income or (loss) 6c 23,819					
		7	•	23,819.			23,819.
		Net rental income or (loss)	(ii) Other	23,013.			25,015.
	/ a		` ′				
		accord durer man mremery	•				
4	D	Less: cost or other basis					
nu		and sales expenses 7, 105 Gain or (loss) 7, 105					
e e		- Gain or (1888)		401			401
her Revenue		Net gain or (loss)		-401.			-401.
he	8 a	Gross income from fundraising events (not					
ō		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	а				
	b	Less: direct expenses 81	)				
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19	а				
	b	Less: direct expenses 9					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10	а				
	b	Less: cost of goods sold	b				
		Net income or (loss) from sales of inventory					
		, , , , , , , , , , , , , , , , , , , ,	Business Code				
Snc	11 a	OTHER INCOME	900003	472.			472.
nec	b						
Miscellaneous Revenue	C						
Sce	٦	I All other revenue					
Σ	·	Total. Add lines 11a-11d		472.			
	12	Total. Add lines Tra-Trd  Total revenue. See instructions		16,287,493.	582,072.	0.	24,939.

232009 12-13-22

# Form 990 (2022) IMPACT NW Part IX Statement of Functional Expenses

	501(1/0) 1 501(1/0)											
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).												
	Check if Schedule O contains a response or note to any line in this Part IX  (A)  (B)  (C)  (D)											
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21											
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22	2,977,311.	2,977,311.									
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	177,908.		155,345.	22,563.							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)											
7	Other salaries and wages	8,988,637.	7,558,030.	1,249,175.	181,432.							
8	Pension plan accruals and contributions (include	-	-	-	-							
	section 401(k) and 403(b) employer contributions)	86,035.	70,945.	13,176.	1,914.							
9	Other employee benefits	915,108.		139,484.	20,259.							
10	Payroll taxes	744,225.	613,693.	113,978.	16,554.							
11	Fees for services (nonemployees):	-	-	-	-							
	Management											
	Legal	9,618.	5,028.	3,919.	671.							
	Accounting	50,737.	26,525.	20,672.	3,540.							
	Lobbying	•		,								
	Professional fundraising services. See Part IV, line 17											
	Investment management fees	1,056.		1,056.								
	Other. (If line 11g amount exceeds 10% of line 25,	•		,								
Ū	column (A), amount, list line 11g expenses on Sch 0.)	385,662.	201,625.	157,132.	26,905.							
12	Advertising and promotion	•		,								
13	Office expenses	190,654.	156,928.	28,371.	5,355.							
14	Information technology	489,954.	256,149.	199,624.	34,181.							
15	Royalties	-										
16	Occupancy	362,778.	330,251.	26,116.	6,411.							
17	Travel	145,286.	144,237.	490.	559.							
18	Payments of travel or entertainment expenses	-										
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest	792.		792.								
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	56,917.		44,298.	12,619.							
23	Insurance	83,232.	61,511.	20,675.	1,046.							
24	Other expenses. Itemize expenses not covered											
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),											
	amount, list line 24e expenses on Schedule 0.)											
а	SUPPLIES	276,735.	262,969.	10,818.	2,948.							
b	STAFF EDUCATION & TRAIN	92,419.	70,576.	21,843.								
С	DUES AND RECRUITING	75,851.	39,085.	29,522.	7,244.							
d	BAD DEBT EXPENSE	6,475.	6,475.									
е	All other expenses	55,593.	1,110.	52,634.	1,849.							
25	Total functional expenses. Add lines 1 through 24e	16,172,983.	13,537,813.	2,289,120.	346,050.							
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)											
					000							

93-0557964 Page 11

IMPACT NW

Form 990 (2022)
Part X Balance Sheet

Part )	^	Balance Sneet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			107,037.	1	999,768
2	2	Savings and temporary cash investments	36,159.	2	45,245		
(	3	Pledges and grants receivable, net			3,427,628.	3	2,898,713
4	4	Accounts receivable, net			61,566.	4	133,993
	5	Loans and other receivables from any current or f					
		trustee, key employee, creator or founder, substa	ntial co	ontributor, or 35%			
		controlled entity or family member of any of these	perso	ns		5	
6	6	Loans and other receivables from other disqualified	ed pers	sons (as defined			
		under section 4958(f)(1)), and persons described i	n sect	ion 4958(c)(3)(B)		6	
<u>.</u>   2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹   9	9	Prepaid expenses and deferred charges			265,474.	9	285,052
10	0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,804,435.			
	b	Less: accumulated depreciation	10b	1,406,155.	444,197.	10c	398,280
11	1	Investments - publicly traded securities			68,182.	11	70,719
12	2	Investments - other securities. See Part IV, line 11			112,070.	12	113,959
13	3	Investments - program-related. See Part IV, line 17	1			13	
14	4	Intangible assets				14	
15	5	Other assets. See Part IV, line 11			0.	15	669,37
16	6	Total assets. Add lines 1 through 15 (must equal			4,522,313.	16	5,615,100
17	7	Accounts payable and accrued expenses			1,201,965.	17	1,491,07
18	8	Grants payable				18	
19	9	Deferred revenue			534,048.	19	227,530
20	0	Tax-exempt bond liabilities				20	
2		Escrow or custodial account liability. Complete Pa				21	
3 22	2	Loans and other payables to any current or forme					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				22	
23	3	Secured mortgages and notes payable to unrelate				23	
24		Unsecured notes and loans payable to unrelated				24	
25	5	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1	17-24).	Complete Part X	20 200		670 023
					29,388.	25	679,831
26	6	Total liabilities. Add lines 17 through 25		V	1,765,401.	26	2,398,432
۸		Organizations that follow FASB ASC 958, check	k here	X			
2	_	and complete lines 27, 28, 32, and 33.		-	2,396,353.	07	2 046 920
27					360,559.	27	3,046,820
28	8	Net assets with donor restrictions			300,339.	28	169,854
5		Organizations that do not follow FASB ASC 958	8, cne	ck nere			
5   ~	_	and complete lines 29 through 33.		-		-00	
29		Capital stock or trust principal, or current funds				29	
30		Paid-in or capital surplus, or land, building, or equ				30	
Net Assets or rund balances 3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.		Retained earnings, endowment, accumulated inco			2,756,912.	31	3 216 67/
		Total net assets or fund balances			4,522,313.	32	3,216,674
33	ა	Total liabilities and net assets/fund balances			4,344,313.	33	5,615,106

Form 990 (2022) IMPACT NW 93-0557964 Page 12

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,			
3	Revenue less expenses. Subtract line 2 from line 1	3				10.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,	756	5,9	12.
5	Net unrealized gains (losses) on investments	5		1(	),4	31.
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		334	1,8	21.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	3,	216	5,6	<u>74.</u>
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?		L	2a		X
	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?		L	2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	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			T		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	; Г			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b	Х	
				Form	990	(2022)

### **SCHEDULE A**

(Form 990)

Total

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.

Open to Public

**Employer identification number** 

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

Inspection

OMB No. 1545-0047

IMPACT NW 93-0557964 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990) 2022 IMPACT NW 93-0557

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization	ıtion
fails to qualify under the tests listed below, please complete Part III.)	

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10939465.	10937856.	13497247.	13342728.	15680482.	64397778.
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	<b>Total.</b> Add lines 1 through 3	10939465.	10937856.	13497247.	13342728.	15680482.	64397778.
	The portion of total contributions						
•	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						64397778.
	etion B. Total Support						013377700
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	10939465.				15680482.	
	Gross income from interest.						
•	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	42,913.	25,735.	13,538.	6,262.	24.868.	113,316.
9	Net income from unrelated business				0,2020		
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	29,455.	46,655.	18,040.	35,062.	472.	129,684.
11	Total support. Add lines 7 through 10	23,1331	10,000	20,0200	33,0020		64640778.
	Gross receipts from related activities,	etc (see instruction	ine)				,658,835.
	First 5 years. If the Form 990 is for the	•	,	fourth or fifth tax v			70007000
	organization, check this box and <b>sto</b>						
Sec	ction C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		14	99.62 %
	Public support percentage from 2021					15	99.52 %
	33 1/3% support test - 2022. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the						
	and <b>stop here.</b> The organization qual						
17a							
	7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances te			-			
h	10% -facts-and-circumstances test	-		*	-		
J	more, and if the organization meets the	-					. 5,0 0.
	organization meets the facts-and-circle		•				
18	Private foundation. If the organization						s
				, ,	,		(Form 990) 2022

### 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.)

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
K	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						
	Add lines 7a and 7b						_
	Public support. (Subtract line 7c from line 6.)						
		( ) 22/2	# > 00.40	( ) 2222	( 1) 000 (	( ) 2222	(0.7
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 Gross income from interest,						
108	dividends, payments received on						
	securities loans, rents, royalties,						
ı	and income from similar sources Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	, , , , , , , , , , , , , , , , , , ,						
,	E Add lines 10a and 10b						
	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						
13	assets (Explain in Part VI.)  Total support. (Add lines 9, 10c, 11, and 12.)		İ				
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third.	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,
	check this box and stop here				•		
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2022 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19	33 1/3% support tests - 2022. If the						7 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	<b>Drivate foundation</b> If the organization	in did not chack a	nov on line 1/1 10.	a or tun check ti	nie hav and een ind	etructions	

Schedule A (Form 990) 2022 IMPACT NW 93-0557964 Page 4

### 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		
4b		
4c		
5a		<u> </u>
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

IMPACT NW

га	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	44-		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?  A 25% controlled entitle of a person described on line 11a or 11b above?	11b		
C	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	1110		I
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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.	2		
Sec	tion C. Type II Supporting Organizations			l
_	Many and the file and the file of the second of the file of the fi		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	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			<u> </u>
	<u>, , , , , , , , , , , , , , , , , , , </u>		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			
800	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	).		
a	The organization satisfied the Activities Test. Complete line 2 below.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	· · · · · · · · · · · · · · · · · · ·	4 4	\	
2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in Activities Test. Answer lines 2a and 2b below.	istruction	Yes	No
a			163	140
u	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
	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			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Part	V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualif	ying trust on N	ov. 20, 1970 ( explain in	Part VI). See instructions
	All other Type III non-functionally integrated supporting organizations m		·	
Sectio	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 1	Net short-term capital gain	1		
2 F	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 F	Portion of operating expenses paid or incurred for production or			
(	collection of gross income or for management, conservation, or			
	naintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 /	Aggregate fair market value of all non-exempt-use assets (see			
i	nstructions for short tax year or assets held for part of year):			
a /	Average monthly value of securities	1a		
b /	Average monthly cash balances	1b		
c F	-air market value of other non-exempt-use assets	1c		
d 1	Fotal (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	explain in detail in <b>Part VI</b> ):			
	Acquisition indebtedness applicable to non-exempt-use assets	2		
	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 1	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 0.035.	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	n C - Distributable Amount			Current Year
1 /	Adjusted net income for prior year (from Section A, line 8, column A)	1		
	Enter 0.85 of line 1.	2		
3 1	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
	Enter greater of line 2 or line 3.	4		
	ncome tax imposed in prior year	5		
	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	nally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990) 2022

instructions)

Schedule A (Form 990) 2022

Part VI

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: MISCELLANEOUS INCOME 2018 AMOUNT: \$ 29,455. 2019 AMOUNT: \$ 46,655. 2020 AMOUNT: \$ 18,040. 35,062. 2021 AMOUNT: \$ 2022 AMOUNT: \$ 472.

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;

# Schedule B

# **Schedule of Contributors**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

**2022** 

Employer identification number

I	93-0557964					
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)( $3$ ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> 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					
, ,	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	lule. See instructions.				
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special Rules						
sections 509(a)(1 contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (Z, line 1. Complete Parts I and II.	and that received from any one				
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.						
year, contributior is checked, enter purpose. Don't c	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
answer "No" on Part IV, lir	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-Fing requirements of Schedule B (Form 990).					

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

1MPACT NW

93-0557964

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		- \$ 1,029,362.	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
2		- \$\$815,998. -	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		5,295,559.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		- \$\$\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 5	Name, address, and ZIP + 4	Total contributions  - \$ 327,465.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$1,192,954.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

1MPACT NW

93-0557964

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Name, address, and ZiP + 4	\$ 1,174,924.	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
8		- - \$\$517,493.	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
9	- Trume, dudices, difd En 1 1	- \$ <u>722,699.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 10	Name, address, and ZIP + 4	Total contributions - \$ 1,018,545.	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
11		- - \$\$18,174.	Person X Payroll
(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

IMPACT NW

93-0557964

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
		\$	
(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
		\$	

Employer identification number

Name of organization

PACT N				93-0557964
fron	clusively religious, charitable, etc., contribution in any one contributor. Complete columns (a) pleting Part III, enter the total of exclusively religious, controlled to duplicate copies of Part III if additional se	through (e) and the following line ent haritable, etc., contributions of \$1,000 or l	ry. For organizations	
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
- =				
		(e) Transfer of gif		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of trar	sferor to transferee
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	sferor to transferee
No. m rt I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
			•	
No. m t I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
_   _				
	Tunnafaurada manara adalah	(e) Transfer of gif		ofeway to transferre
	Transferee's name, address, ar	10 ZIP + 4	Helationship of tran	sferor to transferee
-				_

223454 11-15-22

### **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

**Employer identification number** 

Name of the organization

93-0557964 IMPACT NW

organization answered "Yes" on Form 990, Part IV, line 6.    Total number at end of year
2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are 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 II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that tapply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of land for public use (for example, recreation or education)   Preservation of a conservation easement on the last day of the tax year.  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.  3 Total number of conservation easements   2a   Held at the End of the Tax Year   2a   Total number of conservation easements on a certified historic structure included in (a)   2c      5 Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure instead in the National Register   2d      Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   2d      Number of states where property subject to conservation easement is located   2d      Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year   1      Obes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)
2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are 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 II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that tapply).    Preservation of land for public use (for example, recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of land for public use (for example, recreation or education)   Preservation of a conservation easement on the last day of the tax year.  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.  3 Total number of conservation easements   2a   Held at the End of the Tax Year   2a   Total number of conservation easements on a certified historic structure included in (a)   2c      5 Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure instead in the National Register   2d      Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   2d      Number of states where property subject to conservation easement is located   2d      Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year   1      Obes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)
A Aggregate value of grants from (during year)  4 Aggregate value at end of year  5 Did the organization from all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  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 impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purposel's) of conservation easements held by the organization (heck all that apply).  Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space  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  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 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
Aggregate value at end of year  Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all 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 II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(s) 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 Protection of natural habitat Preservation of open space  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.  Total number of conservation easements  Total acreage restricted by conservation easements  Note Number of conservation easements an a certified historic structure included in (a)  Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easement is ocated  Number of states where property subject to conservation easement is ocated  Number of states where property subject to conservation easement is ocated  Number of states where property subject to conservation easements in tholds?  Number of states where property subject to conservation easements in tholds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easem
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
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 impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat  Protection of natural habitat  Preservation of open space  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.  3 Total number of conservation easements  4 Conservation easements on a certified historic structure included in (a)  5 Number of conservation easements on a certified historic structure included in (a)  6 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  9 Number of states where property subject to conservation easement is located  1 Number of states where property subject to conservation easements is located  2 Number of states where property subject to conservation easements in bolds?  3 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)  Pes No.  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 or
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Part II   Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.   Purpose(s) 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   Protection of natural habitat   Preservation of open space   Proservation of open space   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.   Reld at the End of the Tax Year
Part II
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(s) 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 Protection of natural habitat  Protection of natural habitat Preservation of open space  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.  In total number of conservation easements  Total number of conservation easements  Total number of conservation easements on a certified historic structure included in (a)  Rumber of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Pass 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)?  Preservation of a certified historic structure Please Tuli Held at the End of the Tax Yea  Pass Tuli Held at the End of the
Purpose(s) of conservation easements held by the organization (check all that apply).    Preservation of land for public use (for example, recreation or education)
Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space  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.  Iteld at the End of the Tax Year  Total number of conservation easements  Number of conservation easements  Number of conservation easements on a certified historic structure included in (a)  Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easement is located  Soes the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year where the policy regarding the periodic monitoring conservation easements during the year loss and enforcement of the conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Protection of natural habitat  Preservation of a certified historic structure  Preservation of open space    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.  Total number 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  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  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)?  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  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)?  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
9 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Boes 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)?  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Boes 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)?  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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  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)?
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
<ul> <li>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.</li> <li>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.</li> </ul>
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Part III Organizations 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>b</b> If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of
art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,
provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide
the following amounts required to be reported under FASB ASC 958 relating to these items:
a Revenue included on Form 990, Part VIII, line 1
b Assets included in Form 990, Part X \$

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

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

346,485

5,489

46,306

398,2<u>80</u>.

712,603.

232,183.

446,145.

15,224.

e Other

**b** Buildings

d Equipment

Leasehold improvements

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

1,059,088.

15,224.

237,672.

492,451.

Schedule D (Form 990) 2022 IMPACT NW		9:	3-0557964 <sub>Page</sub> 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	ıd-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	on Form 990 Part IV line 1	1c. See Form 990. Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	 nd-of-vear market value
(1)	(b) Book value	(c) method of valuations observed of	Ta or your market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a) D	Description		(b) Book value
(1) RIGHT OF USE ASSET			669,377
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>15.)</u>		669,377
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 2	
(a) Description of liability			(b) Book value
(1) Federal income taxes			570 001
(2) OPERATING LEASE			679,831.
(3)			
(4)			
(5)			+
(6)			+
(7)			+
(8)			
(9)			600 001
Total, (Column (h) must equal Form 990, Part X, col. (R) line	25)		679,831.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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 (Form 990) 2022

# **SCHEDULE 1** (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.

OMB No. 1545-0047

**Open to Public** Inspection

Name of the organization  IMPACT NW							Employer identification number $93-0557964$
General Information on Grants and Assistance	d Assistance						
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selectic	
criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use	ance?	oring the use of grant	of grant funds in the United States.	States			A Yes No
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Con recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Omestic Organiz 5,000. Part II can	ations and Domestic be duplicated if additi	: Governments. Conal space is need	Somplete if the organ	anization answered "Y	<b>Domestic Governments.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any d if additional space is needed.	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, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	d government org	anizations listed in the	e line 1 table				
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Schedule I (Form 990) 2022

93-0557964

Schedule I (Form 990) 2022 IMPACT NW

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(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
HOUSING AND SAFETY NET SERVICES	22435	2,582,366.	615.	AWA	FOOD
CHILDREN, YOUTH AND FAMILY SERVICES	5127	221,440.	4,643,	FMV	HOLIDAY DRIVE, GIFT CARDS, SCHOOL SUPPLIES AND HOME GOODS, FOOD
SENIORS AND ADULTS WITH DISABILITIES SERVICES	2183	20,400.	• 0	VMT	
DEVELOPMENT	Н	• 0	1,955,	FMV	VIDEO FOR EVENT
EARLY CHILDHOOD	777	143,119.	2,773. FMV		HOLIDAY DRIVE
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.  PART I, LINE 2:	uired in Part I, line	2; Part III, column	(b); and any other ad	ditional information.	

PROCESS	
BASIC	
THE	
AND	
ARTMENT MANAGERS	
DEPARTMENT	
ΒY	
MONITORED	
ΠS	
ASSISTANCE	
CLIENT	

# AND QUALIFICATIONS ARE SET BY THE GOVERNING CONTRACTS AND GRANTS WHICH FUND

SERVICES.

### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

IMPACT NW

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

Employer identification number 93-0557964

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			77
	The organization?	5a		X
b	Any related organization?	5b		X
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			X
	The organization?	6a		X
b	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7		Х
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		A
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	0		X
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9		
	Regulations section 53.4958-6(c)?	ı 🔊	1	1

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2022

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	( <b>D</b> ) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ANDY NELSON EXECUTIVE DIRECTOR	≘ ≘	159,460.	15,802.	0	0	865.	176,127.	000
	€ €							
	Ξ							
	≘∈							
	⋛							
	(i)							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	Ξ							
	⊞							
	(i)							
	≘							
	Ξ							
	▣							
							Schedu	Schedule J (Form 990) 2022

formatio
mental In
Supple
Part III

Ċ.
烏
nai
J.C
υĔ
a
õ
ij
b
ă
any
٥
t
pa
<u>.0</u>
무
te
ble
Ĕ
8
0
₹ S
1.
=
ď
Ť
₽
Б
ä
ώ
þ
a
٧,
Ć.
9
Ša,
,
2c
ď,
5
<del>1</del> C,
,
4
á,
4
ú
16
a,
÷
es
.⊑
art
ď
ŏ
5
ĕ
qui
ē
'n
Ö
∓
Ä
desc
ŏ
ō
Ē,
ti.
lanat
ä
expl
2.3
Ë,
ation,
mation,
formation,
information,
e information,
the information,
e the information,
the information,

# SCHEDULE M (Form 990)

**Noncash Contributions** 

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

2022

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990.

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

Inspection

(d)

Name of the organization

IMPACT NW

93-0557964

Part I Types of Property

		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu		-	S
1	Art - Works of art		literns contributed	Form 990, Part VIII, line To				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		10,016	FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	1	69,071	FMV			
10	Securities - Closely held stock			, ,				
11	Securities - Partnership, LLC, or							
• •	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organization	zation durino	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement <b>29</b>				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for							
	exempt purposes for the entire holding period'	?				30a		X
b	o If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?							_X_
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		<u> </u>
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	column (c) for	a type of property	for which column (a) is che	ecked,			
	describe in Part II.							

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

Schedule M (Form 990) 2022

232142 09-09-22

Schedule M (Form 990) 2022

### SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

IMPACT NW

**Employer identification number** 93-0557964

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND OPPORTUNITY. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: IMPACT NW PROVIDES PROGRAMS THAT HELP PEOPLE AND FAMILIES FACING FINANCIAL HARDSHIP TO STABILIZE, INCLUDING RENT AND UTILITY ASSISTANCE ACCESS TO RECOVERY AND OTHER SERVICES. A PRIVATE, LOCALLY-RUN ORGANIZATION, IMPACT NW ALSO PROVIDES PROGRAMS THAT STRENGTHEN PEOPLE WITH OPPORTUNITIES TO DEVELOP LIFE SKILLS, EDUCATION AND JOB READINESS. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM IS REVIEWED BY THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER. COPY OF THE FORM 990 IS SENT ELECTRONICALLY TO EACH MEMBER THE GOVERNING BODY PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS AND DIRECTORS ARE REQUIRED TO DISCLOSE ANNUALLY ANY POSSIBLE CONFLICTS OF INTEREST IN THE EVENT OF POTENTIAL CONFLICT APPOPRIATE STEPS WOULD BE TAKEN. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD REVIEWS AND APPROVES EXECUTIVE DIRECTOR SALARY BASED ON PERFORMANCE AND COMPARABLE MARKET SALARIES THE EXECUTIVE DIRECTOR SETS THE WAGES FOR EMPLOYEES BASED ON PERFORMANCE AND COMPARABLE MARKET DATA.

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

Schedule O (Form 990) 2022

Name of the organization  IMPACT NW	Employer identification number 93-0557964			
FORM 990, PART VI, SECTION C, LINE 19:				
GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND POLICIES AR	E AVAILABLE UPON			
REQUEST.				
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:				
TO REMOVE DEFERRED GAIN IN ACCORDANCE WITH NEW GAAP				
STANDARDS	334,821.			
FORM 990, PART XII, LINE 2C				
THE AUDIT OVERSIGHT AND SELECTION PROCESS HAS NOT CHANGED	FROM THE			
PRIOR YEAR.				

Schedule O (Form 990) 2022

Page 2